

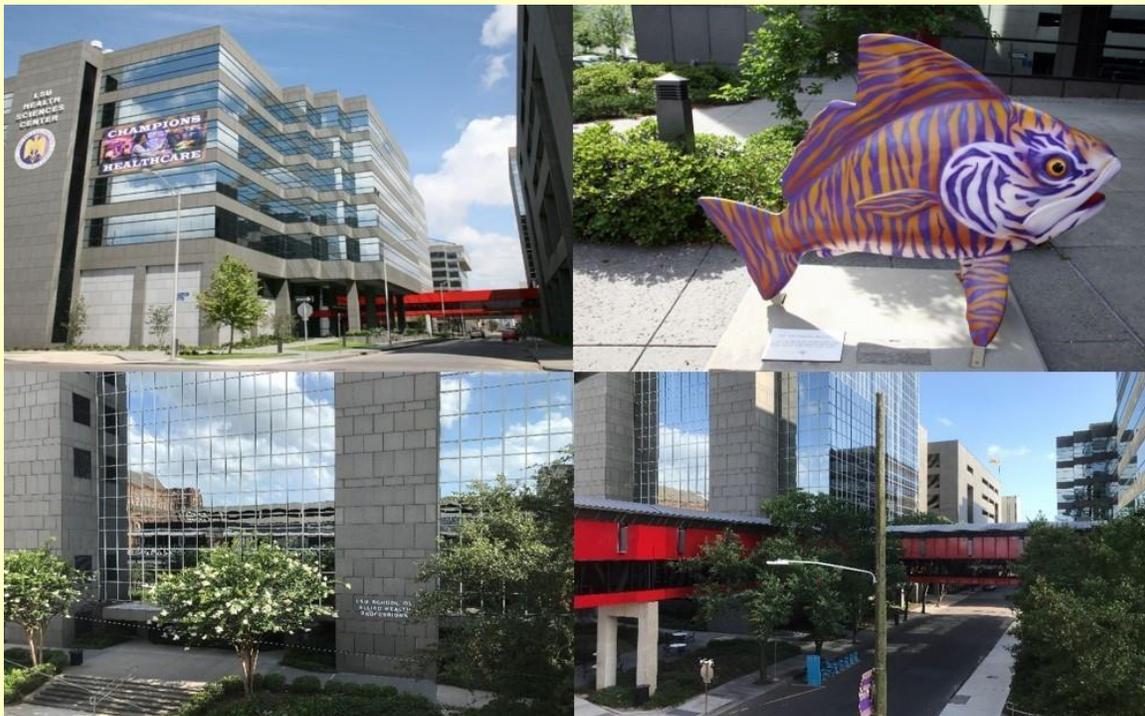
The Coalition Chronicle

Coalition for Baccalaureate and Graduate Respiratory Therapy Education

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Spotlight Article

Louisiana State University Health Sciences Center New Orleans



Respiratory Therapy Program

By John Zamjahn, PhD, RRT, RRT-ACCS, RPFT

Program Director

Overview

Louisiana State University Health Sciences Center at New Orleans (LSUHSC-NO) is located in the heart of New Orleans, surrounded by the University Medical Center, which is the largest training center for healthcare professionals in Louisiana, nearby are the Louisiana Cancer Research Center, the New Orleans Veterans Affairs Medical Center, and Caesars Superdome. LSUHSC-NO is an academic health sciences center offering 31 degree programs across six schools:

Allied Health Professions, Dentistry, Graduate Studies, Medicine, Nursing, and Public Health. In addition, there are eight Centers of Excellence: 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 LSUHSC-NO provides excellence in education, research, and public service through direct patient care and community outreach.

State-of-the-Art Simulation Center

A brand-new LSUHSC-NO Center for Advanced Learning and Simulation (CALS) provides abundant classroom and simulation lab space for student learning, and includes a student testing center and wellness center for students and faculty. The CALS also has a Standardized Patient Training Facility, Nursing Hospital Simulation Laboratory equipped with twenty full-body, moderate-fidelity Nursing Anne simulators, and a Nursing Skills and Technology Center. The Center includes student practice labs, Pyxis MedStations, and a 10-room simulation facility equipped with full-body, interactive/reactive high-fidelity simulators: four adult patient simulators (CAE Apollo), two pediatric patient simulators (Gaumard Peds Hal and Advanced Peds Hal), two adult and one pediatric critical care and anesthesia patient simulators (CAE HPS and CAE PediaSim), two newborn patient simulators (CAE Luna and Gaumard Super Tory), and three maternal birthing simulators (Gaumard Noelle, Gaumard Victoria, and CAE Lucina).



Interprofessional Education

The LSUHSC-NO Interprofessional Education and Collaborative Practice Office (IPECP) is the only centralized office (academic and clinical) in Louisiana focused on interprofessional advancements in health education and healthcare delivery.

The IPECP (<https://www.lsuhs.edu/administration/academic/ipecp/>) oversees a variety of interprofessional collaborative efforts among its six schools to support students/learners and faculty in their interprofessional journey, including its core activity Team UP[®], single IPE experiences (including 2-3 programs), IP Scholars Program, Building Health Teams Summer Program, and faculty professional development and research in interprofessional education.

Team UP: Commit to Compassion, Communication, Collaboration[®] is a two-year longitudinal curriculum that provides classroom and community-based experiences for first-year students in 19 programs (Six schools), and second-year students in 17 programs (five schools). Established in 2017, Team Up[®] has exposed over 4000 students to the Interprofessional Education Collaborative core competencies. The Team Up[™] experience includes 60 student teams, and 6 sessions for Year 1 and 6 sessions for Year 2. The focus of Team Up[™] Year 1 is for students to build their interprofessional team, developing effective collaboration and communication skills. 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. Year 2 provides second-year students with the opportunity to enhance their knowledge about professional roles while applying collaborative skills through case-based learning. The Team Up[®] curriculum addresses issues such as social determinants of health, stereotypes that exist about students' chosen professions, social justice, and population health.



The IP Scholars program is designed to broaden the pre-health professional's interprofessional lens in education, scholarship, leadership and/or practice. Scholars, paired with a faculty mentor, complete activities from each of three selected pillars. Learners share their overall experiences and learning with the IPECP Faculty Council at the completion of the program. Students achieving the IP Scholars designation are recognized for their accomplishment during pre-commencement ceremonies.

The IPECP also offers a virtual 4-week virtual summer program, called Building Health Teams, for high school upperclassmen and college students across the country, who are interested in learning about or pursuing health careers. Students work in small teams developing foundational teaming skills.

They gain insight into health careers from LSUHSC-NO faculty, acquiring a better idea of what health career they would like to pursue and/or what roles other health professionals will play on their future health teams.

School of Allied Health Professions

The School of Allied Health Progression (SAHP), which celebrated its 50th anniversary in 2020, comprises seven academic departments offering nine professional academic degree programs.

Undergraduate degrees:

- ◆ Bachelor of Science in Cardiopulmonary Science (Cardiovascular sonography and respiratory therapy programs)
- ◆ Bachelor of Science in Medical Laboratory Science

Graduate degrees:

- ◆ Master of Communication Disorders in Speech and Language Pathology
- ◆ Master of Health Sciences in Clinical Mental Health Counseling
- ◆ Master of Occupational Therapy
- ◆ Master of Physician Assistant Studies
- ◆ Doctor of Audiology
- ◆ Doctor of Physical Therapy

The SAHP also includes the Human Development Center, a University Center of Excellence in Developmental Disability, Education, Research, and Service that provides programs to increase the capacity of healthcare providers to support individuals with developmental and acquired disabilities and their families in all aspects of life in the community.

Department of Cardiopulmonary Science

The Department of Cardiopulmonary Science (CPS) offers professional academic programs in respiratory therapy and cardiovascular sonography. Applicants apply online using the Allied Health Centralized Application Service beginning in September of each year. Programs start in May and accepted students (up to 15 in respiratory therapy) have completed no less than 60 credit hours of prerequisite pre-professional courses. Often



students hold baccalaureate and even graduate degrees upon acceptance. Our program size allows students to develop a comfortable learning relationship with each other and with our dedicated faculty who has over 50 years of collective teaching experience in respiratory therapy. The program has a long, successful history with outstanding program outcomes. This year, faculty and students will celebrate the respiratory therapy program's 45th anniversary at LSUHSC-NO.

Our respiratory therapy program prepares leaders for the field of respiratory care by including curricular content related to the acquisition of skills in management, education, research, and advanced clinical practice. Along with a course in health care management, students attend a management rotation with respiratory care managers/directors of local area hospitals in which they wish to work after graduation. Senior students complete the AARC Clinical Practices of



Haley Alvarado, graduate class of 2023, was awarded the John B. Bobear Award for Outstanding Student in Respiratory Therapy and the Dean's Award, as a graduate who represents the highest ideals of the SAHP in the areas of scholarship and service.



Pictured left to right: LSUHSC-NO Respiratory Therapy Program senior students: Hailey Carter, Justice Pitts, Amanda Nguyen, and Alexis Werner, who were recognized for best oral poster presentation "The effects of waterpipe tobacco smoking on the respiratory system" during

Effective Preceptors course, becoming student peer teaching assistants to junior students during their first clinical rotation. Students gain bedside teaching skills from which they can build upon after graduation as clinical affiliate preceptors. Within the advanced topics in respiratory therapy and clinical inquiry courses, students learn to evaluate research, write and present abstracts as poster presentations, and develop and present answers to PICO questions. The department has a complete pulmonary function lab in which students train as part of their pulmonary diagnostic tests course. Our curriculum also includes a polysomnography course with sleep lab rotations. Graduates are encouraged to pursue advanced credentials, such as the RPFT and RRT-SDS, from the National Board for Respiratory Care.

Interdisciplinary and IPE Curriculum

The CPS curriculum is designed for CPS students throughout their chosen program of study to complete 20 of the required 69 credit hours of course work together, beginning with human physiology and human gross anatomy. CPS students are currently conducting cadaveric dissections in the CALS building during renovation of the LSUHSC campus cadaver labs. Training alongside students from other



academic programs within the Health Science Center enriches the educational experience of our students. In addition to TeamUp, respiratory therapy students participate in small-scale interprofessional and intraprofessional experiences with students from the Schools of Medicine, Nursing, and Allied Health Professions. Learning activities are designed to strengthen student outcomes in communication, teamwork, and evidence-based practice. Such experiences include obstetric emergencies and delivery of high-risk neonates, providing advanced cardiac life support, and homecare patient safety involving patient transfers, medical lines, and respiratory therapy equipment. Nurse anesthesia program faculty provide our students airway lectures and airway management labs, which are taken with nurse anesthesia students. In the last semester, our students get to provide airway assessment and intubation, under certified registered nurse anesthetist's supervision, during an operating room clinical rotation at University Medical Center, New Orleans.

Didactic instruction is closely tied to exemplary clinical experiences in a variety of settings. Among these include in-hospital neonatal, pediatric, and adult general and intensive care, high-risk delivery, trauma/emergency room, hyperbaric oxygen therapy, pulmonary rehabilitation, and pulmonary diagnostics. Others include outpatient specialty clinics for patients with sleep disorders, amyotrophic lateral sclerosis, pulmonary hypertension, cystic fibrosis, COPD, and asthma. Students experience over 1000 hours of diverse clinical training over 5 semesters. The diversity of our 16 clinical affiliates, 11 within the New Orleans metropolitan area, provides a wide range of student experiences and fosters an environment that prepares students to enter professional practice with confidence.

Community Events



Faculty and students often participate in community events to increase awareness of the respiratory therapy profession. These might include attending LSU Day at the State Capitol, educating legislators about the respiratory therapy profession and lung health, performing spirometry screenings, as well as attending high school and college career fairs. This year’s big event was participating in STEM (Science, Technology, Engineering, and Math) Fest 2023 hosted by the New Orleans Saints, New Orleans Pelicans, and Chevron at the Ochsner Sports Performance Center in Metairie, LA. People of all ages were able to learn about how we breathe using the principle of Boyle’s law. Interactive demonstrations included negative and positive pressure ventilation, how to build a lung model, and airway intubation.

Curriculum

Prerequisite Courses (60 Semester Credits)			
English Composition	6	Science Elective	3
Humanities	9	Psychology	4
Chemistry (General and Laboratory)	8	Physics (General and Laboratory)	4

Mathematics (Algebra and Trigonometry)	6	Microbiology (General and Laboratory)	3
Biology (General and Laboratory)	8	Art Elective	3
Human Physiology	3	Sociology	3
Respiratory Therapy Program Track (Courses shown italicized include cardiovascular sonography program students)			
JUNIOR YEAR		SENIOR YEAR	
Summer Semester		Summer Semester	
<i>CPSC 3100 Introduction to Clinical Cardiopulmonary Sciences</i>	1	CPSC 4115 Geriatric Respiratory Care	1
<i>CPSC 3130 Cardiopulmonary Human Gross Anatomy</i>	4	CPSC 4135 Critical Care Concepts II	4
<i>CPSC 3220 Cardiopulmonary Physiology</i>	3	CPSC 4135 Respiratory Clinics III	4
Total Credits: 8		Total Credits: 9	
Fall Semester		Fall Semester	
CPSC 3200 Respiratory Therapy Fundamentals	4	<i>CPSC 4205 Health Care Management</i>	1
<i>CPSC 3270 Patient Assessment</i>	3	CPSC 4215 Pulmonary Rehabilitation and Home Care	2
<i>CPSC 3280 Cardiopulmonary Pathophysiology</i>	3	CPSC 4225 Pulmonary Diagnostic Tests	2
CPSC 3285 Respiratory Clinics I	3	CPSC 4235 Respiratory Clinics IV	5
<i>CPSC 3290 Principles of Cardiac Electrophysiology</i>	2	CPSC 4325 Advanced Topics in Respiratory Therapy	2
Total Credits: 15		Total Credits: 12	
Spring Semester		Spring Semester	
<i>CPSC 3210 Cardiopulmonary Pharmacology</i>	1	CPSC 4300 RRT Review	4
<i>CPSC 3360 Medical Ethics</i>	1	CPSC 4310 Polysomnography	3
CPSC 3362 Critical Care Concepts I	3	CPSC 4320 Respiratory Clinics V	4
CPSC 3300 Neonatal And Pediatrics	4	<i>CPSC 4380 Clinical Inquiry</i>	1
CPSC 3370 Advanced Pulmonary Pathophysiology	1		
CPSC 3395 Respiratory Clinics II	3		
Total Credits: 13		Total Credits: 12	
TOTAL CREDIT HOURS: 69			

Applicants who hold a registry credential in respiratory therapy (RRT) and wish to attain a Bachelor of Science in Cardiopulmonary Science may complete the associated track (shown below) and be exempted from courses that are directly

related to the held credential. Required coursework must be completed in not more than four years. This curriculum track is only accredited by the Southern Association of Colleges and Schools, and not by the Commission on Accreditation for Respiratory Care.

RRT-to-B.S. in Cardiopulmonary Science Track			
JUNIOR YEAR		SENIOR YEAR	
Summer Semester		Summer Semester	
CPSC 3130	Cardiopulmonary Human Gross Anatomy	4	
CPSC 3220	Cardiopulmonary Physiology	3	
Total Credits: 7		Total Credits: 1	
Fall Semester		Fall Semester	
CPSC 3270	Patient Assessment	3	CPSC 4205 Health Care Management 1
CPSC 3280	Cardiopulmonary Pathophysiology	3	CPSC 4215 Pulmonary Rehabilitation and Home Care 2
CPSC 3290	Principles of Cardiac Electrophysiology	2	CPSC 4225 Pulmonary Diagnostic Tests 2
			CPSC 4325 Advanced Topics in Respiratory Therapy 2
Total Credits: 8		Total Credits: 7	
Spring Semester		Spring Semester	
CPSC 3210	Cardiopulmonary Pharmacology	1	CPSC 4310 Polysomnography 3
CPSC 3370	Advanced Pulmonary Pathophysiology	1	CPSC 4320 Respiratory Clinics V 4
			CPSC 4380 Clinical Inquiry 1

Faculty



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, RRT-ACCS, RPFT, is 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, New Orleans where he earned a B.S. (cardiopulmonary science) and MHS (health science). He obtained his Ph.D. (pathology) from LSUHSC-NO. 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 has served on the Boards of Directors of the Louisiana Society for Respiratory Care and the CoBGRTE.



Molly Quinn Jensen, MBA, RRT, RRT-ACCS, RRT-NPS, is Assistant Professor of Clinical Cardiopulmonary Science and director of clinical education for respiratory therapy in the Department of Cardiopulmonary Science. Born and raised in Minneapolis, Minnesota, she obtained her Bachelor of Science degree in Respiratory Therapy from St. Catherine's University in St. Paul, Minnesota. After obtaining her Master of Business Administration in Healthcare Administration, she entered full-time academia in 2016 as the Director of Clinical Education at her alma mater, transitioning to LSUHSC-NO in the summer of 2021.



Kyle L. Happel, MD, FCCP, is Section Chief and Louis R. Cabiran Professor of Medicine, Section of Pulmonary & Critical Care Medicine/Allergy & Immunology, in the Department of Medicine. He is the medical director of the respiratory therapy program in the Department of Cardiopulmonary Science. He is board certified in internal medicine with sub-board specialties in pulmonary disease and critical care medicine. Dr. Happel's major research interest is bacterial host defenses in the lungs, particularly the adaptive immune response.



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

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School of Allied Health Professions

Department of Cardiopulmonary Science

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<https://alliedhealth.lsuhscc.edu/cp/defaultRT.aspx>



INTERVIEW



Nancy E. Colletti, PhD, RRT, CPFT, FNAP
Professor, MSRT Program Director
University of Cincinnati
Cincinnati, Ohio

By Jeff Ward, MEd, RRT, FAARC
Mayo Clinic Multidisciplinary
Medical Simulation Center
Rochester, Minnesota

1. Tell us about your early days as a respiratory therapist.

What events/circumstances brought you into the profession?

As a freshman at Stony Brook University (SBU), my original intent was to enter the physical therapy (PT) program in my junior year. However, after volunteering in a private PT office and a large PT department at a county hospital during the summer, I realized the PT profession was not at all what I had expected. I attended an open house at SBU's School of Allied Health Professions where I learned about the Cardiorespiratory Sciences program. The program at that time was accredited in both respiratory therapy and cardiopulmonary technology and included training in perfusion. When I heard about clinical rotations in surgery, intensive care, and emergency rooms, I knew I had found my calling in these exciting and dynamic clinical areas. Upon graduation, I earned my credentials in respiratory therapy and cardiopulmonary technology. Initially, I worked full-time in the cardiac catheterization lab as a cardiovascular technologist and part-time (every other weekend) as a respiratory therapist. My knowledge and skills in cardiology served me well, especially in the critical care and emergency department. A few years after graduation, I completed some additional training in echocardiography and earned my credential in non-invasive cardiovascular technology as well. The respiratory care department where I worked also provided echocardiography services, so some weekends I would pick up a few extra hours performing echocardiograms. While I was working in the cardiac catheterization lab, I served as a clinical instructor for students from Stony Brook University during their clinical rotations. My work experience and dual credentials provided an excellent pathway to assume a full-time faculty position in the Cardiorespiratory Sciences program at Stony Brook University.

2. Who were your mentors?

My mentors were the faculty in the School of Allied Health Professions. As an undergraduate, Dr. Bill Treanor and Ken Axton, MS, RRT were the two people who provided me with the greatest advice and guidance. Ken gave me a strong foundation in physical assessment and respiratory therapeutics that instilled in me the confidence to share my thoughts and ideas with both physicians and nurses at the bedside and contribute to the patient care plan. Ken helped me to understand the importance of contributing to the conversation by sharing my own assessment of the patient's status with objective data to support my conclusions and recommendations for care. Dr. Treanor encouraged me to expand my professional goals into education and research. They both encouraged me to apply for my first faculty position. While working on my Master of Science degree my mentors were Dr. Nanci Rice and Dr. Barbara Panessa-Warren. They were both excellent role models and mentors for a novice college teacher. I continue to do my best to emulate their best practices as I strive to improve my teaching and learning experiences my students provide for me.

3. How did furthering your education contribute to your career path?

What got you on your path towards leadership roles in the AARC and/or related organizations?

It was my dual credentials and work experience in both respiratory therapy and cardiovascular technology that earned me my first faculty position. However, to keep this position, I was required to hold a graduate degree. I enrolled in a MS degree in Health Sciences with a concentration in education. However, the MSHS curriculum also included management and research courses and after finishing my MS degree I completed a Certificate in Healthcare Management through the College of Business. This prepared me for professional leadership positions in cardiac catheterization and later a private cardiology practice. Ultimately, these leadership skills translated to my role as a respiratory care program director especially with respect to setting goals and strategic planning. After earning my MS degree, I was promoted to assistant professor. When I began looking for a change in my work environment, I was able to find just what I was looking for when I came across a job posting in which I was able to check off each of the requirements: graduate degree, credentials, and work experience. I was offered the position as Associate Professor and Program Director at Kettering College.

When I began investigating doctoral programs, I was seeking further education to enhance my teaching and improve student learning in my classes. I was working with a broad spectrum of students from traditional first-time college

students to non-traditional college students returning for second careers. Online learning was just beginning to take hold and I wanted to learn more about how to leverage that tool to provide a better learning experience for students. This is what led me to my PhD in education with an area of specialization in instructional design for online learning.

Throughout my professional career, I have always served at the local and state affiliate levels of the AARC. I always had ideas to share and a willingness to jump in and help out at all levels. My path towards leadership roles in professional organizations grew from networking. While living and working in New York, I was working with Mike McPeck, Ken Axton, Jim Ganetis, and Tom Smalling. I served with them on the Southeastern Chapter Board of Directors and the program planning committee.

I was nominated to the Lambda Beta Honor Society and became President of the Stony Brook Chapter. Then several years later, I was appointed as an At-Large Member of the Lambda Beta Society Executive Board and eventually served as President of the Lambda Beta Board of Directors for a few years.

When I moved to Ohio, I continued to grow my network to include Tom Hill and Joe Huff; I began my service with the Ohio Society for Respiratory Care. I've served continuously on the Program Planning and Legislative Committees. I was appointed to assume the education committee, chair and elected multiple times as Western district director before being elected as vice-president and now president.

4. What are some key lessons you have learned as a clinician, educator, and leader in the profession?

It is essential to speak up and engage in conversations. It is through these conversations that you make connections and expand your network. In the clinical setting, this enables the team to work more efficiently and effectively to deliver the best care possible. As an educator and leader, we can learn from one another and find solutions to problems. I learned to reach out and invite new colleagues to join in the conversations. This includes both professional and social engagements.

I've recently had the opportunity to join with professional colleagues across many different disciplines, colleges, and universities through my work with the National Academies of Practice (NAP) and Association of Schools Advancing Health Professions (ASAHP). The level of energy and enthusiasm is wonderful and creates the excitement and momentum to create a positive change. I hear a

common theme while working in these interprofessional groups, “we love our RT’s, we need our RT’s, we wish we had more RT’s!”

5. What would you recommend to new graduate therapists just beginning their careers.

Get involved with committees and community service opportunities with your employer and/or local non-profit organizations. Build and expand your network by maintaining your professional membership in the AARC and attending professional meetings and conferences. This is where you meet people who can help you on your career path. Reach out to your local leaders at the AARC state affiliate and ask how you can serve the society. In your department, share a recent research article with a colleague and share ideas of how you might apply these results to a problem or issue in your environment. Discuss ideas for clinical research or quality improvement projects in your department. Make recommendations for interprofessional development programming.

[ASRT to BSRT & MSRC Degree Advancement Programs](#)

[BSRT and MSRT Entry Programs](#)

[Graduate Respiratory Therapist Programs](#)

www.CoBGRTE.org

CoBGRTE Scholarships Reminder

The Mission Continues

**José D. Rojas, PhD, RRT, RPFT, FAARC
Chair CoBGRTE Scholarship Committee**

The CoBGRTE Board of Directors, with steadfast tenacity, continues to make scholarship money available to help support school expenses for members pursuing baccalaureate, graduate, or doctoral degrees. Encourage your friends, colleagues, and students to apply! It is not an onerous process. This year to improve the process for application and distribution, the scholarship committee has made the recommendations outlined below. The process for application is relatively simple and the application has been posted on the CoBGRTE website since April 1, 2023. Don’t let this opportunity pass you by! **The application**

cycle will remain open until October 1, 2023, and we hope to make announcements of winners and present awards at the AARC Congress.

1. The scholarship cycle: for all awards (NBRC supported, Merit, Malinowski, Smallwood) opened April 1 and closes on 10/1/23. Send your applications early!

2. There are four award categories:

a. Merit Scholarships (\$8,000)

-eligibility (BS and MS entry-level CoBGRTE member, BS and MS degree advancement CoBGRTE members; *Propose to allocate four (4) \$1,000 scholarships for entry-level and four (4) \$1000 scholarships for degree advancement depending on number of applications*)

-required materials (letter of support from faculty/PD/DCE, professional resume, completed application, unofficial transcript, and essay)

b. Smallwood Research Scholarship (\$2,000)

-eligibility: BSRC and MSRC entry-level CoBGRTE member, BSRC and MSRC degree advancement CoBGRTE members.

-required materials: research proposal that includes a budget; proposal should include literature review with hypothesis or research question; project timeline; letter of faculty support; and professional resume.

c. Malinowski Leadership Award (\$2,000)

-eligibility (therapist in a supervisory or lead position; BSRC or MSRC degree advancement or clinical research program; CoBGRTE member)

-required materials (QI project or clinical research proposal; includes a budget; proposal should include literature review/hypothesis or research question/ specific aims/ project timeline; letter of faculty or hospital administration support; professional resume)

d. NBRC-supported faculty awards (\$20,000)

-eligibility (RRT, CoBGRTE member, current faculty member or pursuing faculty position, enrolled in doctoral program)

-required materials (proposal for required funds that includes budget/justification; letter of support from Chair/Dean; CV)

-award \$5,000 to \$10,000 based on proposal/need

Members of the CoBGRTE Scholarship Committee

Bruce Adcock, M.Ed, RRT, RRT-NPS, CHSE	Assistant Professor University of Texas Medical Branch
Brian Cayko, MBA, RRT, FAARC	Clinical Assistant Professor Boise State University
Johanna Gilstrap, MPH, RRT, MCHES, AE-C, NHDP-BC	Commander US Public Health Service
Jie Li, PhD, RRT, RRT-ACCS, RRT-NPS, FAARC	Associate Professor Rush University
David Lopez, Ed.D, RCP, RRT	Associate Professor & Chair Loma Linda University
Maxie Battey-Muse, MS, RRT, RRT-NPS, AE-C	Clinical Instructor Georgia State University
Molly Quinn Jensen, MBA, RRT, RRT-ACCS, RRT-NPS	Assistant Professor Louisiana State University Health Science Center
Nancy Colletti, PhD, RRT, CPFT, FNAP	Professor University of Cincinnati
Nicholas Henry, PhD, RRT-ACCS, RRT-NPS, AE-C	Associate Professor Texas State University
Thomas Stokes, MEd, RRT	Assistant Professor University of Texas Health Science Center – San Antonio
Tyler Weiss, MSc, RRT, RRT-ACCS, AE-C, FCCP	Assistant Professor Rush University
José D Rojas, PhD, RRT, RPFT, FAARC	Associate Professor CoBGRTE Scholarship Committee Chair University of Texas Medical Branch

International Spotlight

S T.R.C. Juan Carlos Pérez González



Founder, Former President, and Director of the Board of Directors of the Asociación Federal de Terapeutas Respiratorios in Mexico

Founding Member and President of the Federación Latinoamericana de Terapia Respiratoria

**By Wendy Castro, MS, RRT, RRT-NPS
Chair, CoBGRTE International Outreach Committee**

1. Describe a typical day practicing as an RT in your country.

I am regularly in the Office of the Federal Association of Respiratory Therapists, where I am the Director of the Board of Directors, carrying out functions of logistics, social relations, commercial relations, academic and governmental relations, which allow us to make the Association sustainable. We do this to offer some professional growth opportunities to our colleague respiratory therapists in Mexico. Today we have online courses, a diploma in mechanical ventilation, and free biweekly virtual sessions with an updated focus on respiratory therapy topics.

I am currently carrying out a process with the Chamber of Deputies and Senators of my country to be able to recognize respiratory therapy in the General Mexican Health Law, which will allow the possibility of generating new opportunities for this profession. This process has already taken almost 5 years to develop, and we hope to be able to obtain approval in the coming months.

In the afternoon, I work in the intensive care unit and other services of the High Specialty Hospital of the Mexican Institute of Social Security in the City of Mérida Yucatán where I currently reside. Here I develop others in the field of mechanical ventilation (which is my passion). I also develop care plans for patients with chronic and acute pathologies. We periodically perform preoperative pulmonary function tests and, initiate patients to postoperative pulmonary rehabilitation.

On some occasions, I go to private hospitals to provide respiratory therapy care for medical groups that I belong to. Last but not least, every Saturday I am a professor in the program with the 1st Diploma in Mechanical Ventilation of the

Federal Association of Respiratory Therapists, which should be noted is the first diploma to be carried out in Mexico with a university endorsement.

2. What drew you to respiratory care?

I believe that destiny prepared me for this noble and great profession. My mother worked for 40 years in the medical sector of my country, and since I have memories related to the world of health, at some point in my life approximately 20 years ago, I felt lost and could not find a way to direct my path. I had the opportunity to agree to take an exam to study a profession in healthcare. The only one that caught my mind and attention was respiratory therapy. I can honestly say that I knew nothing about this profession, but I always saw how the Respiratory Therapists at the Hospital where my mother works were necessary. During events where there were serious patients, no one on the interdisciplinary team moved a single finger until the respiratory therapist was with them. They always carried a machine that they connected to the patient's endotracheal tube. I understood that respiratory therapists play a crucial role in health care and life, so I decided to study and become a respiratory therapy professional.

3. What obstacles did you have to overcome to obtain your degree and practice in your country?

This has been a great challenge because in my country there are very few options to study respiratory therapy. Only a technical level is recognized and not a degree. In school from that first class I took, I was amazed at this profession with the little information that the professor gave us. I finished the 3-year school program with clinical field practices and later completed a year of Social Service as an intern for a respiratory therapy technical professional. To be able to write a thesis and Graduate with the document that today accredits me as a professional technical therapist in respiratory is amazing. When I entered the world of work, I found that the health team does not easily recognize the respiratory therapist. For this reason, I continue studying and preparing myself in areas such as ergometry, mechanical ventilation, pulmonary function and very recently in pulmonary rehabilitation.

4. What formal education did you have?

There is no university education in my country for respiratory therapy, at least not at the undergraduate level, only at the technical level, I went to the National College for Technical Professional Education, from which I am a graduate. I have attended and taken virtual education in ergometry and analysis of gases, in mechanical ventilation, obtained certification in spirometry and hold certification from The Latin American Board for Professional Certification in Respiratory Therapy.

5. What profession associations are you a member of?

Currently, I am:

- 1. Founder, Former President, and Director of the Board of Directors of the Asociación Federal de Terapeutas Respiratorios in Mexico "AFTR".
- 2. Founding Member and President of the Federación Latinoamericana de Terapia Respiratoria "FELATERE".
- 3. I am a member of the American Association for Respiratory Care.

The Coalition Chronicle Archive Now Available as a Member Resource

**By Thomas A. Barnes, EdD, RRT, FAARC
Executive Director, President Emeritus, CoBGRTE
Editor-in-Chief of *The Coalition Chronicle***

Archive Access

The [Member Resources page](#) on the CoBGRTE website now has an archive of all past issues of *The Coalition Chronicle*. *The Coalition Chronicle* is a monthly newsletter with 137 consecutive issues published by CoBGRTE since January of 2012. The newsletter is distributed monthly by the board of directors as a pdf file via email to approximately 800 RT professionals: CoBGRTE active, students, institutional, and corporate members; and members of the AARC House of Delegates, AARC affiliate presidents, AARC Board of Medical Advisors, and professionals in leadership positions with the NBRC, AARC, and CoARC. CoBGRTE members can receive the username and password used to access the resources page by sending their membership number to [Contact CoBGRTE](#).

Interviews

Between January 2016=June 2023, members of the editorial board have interviewed 47 experienced RT professionals. Also, included by editors are interviews of RTs in clinical practice outside the USA. International interviews are from RTs working in Canada, Mexico, Germany, India, Columbia, Ghana, Egypt, Singapore, and Saudi Arabia.

Spotlight Articles

Most issues of the Chronicle include a *Spotlight Article* that profiles a university baccalaureate and/or graduate RT programs or a respiratory care department of major medical center. Since 2013, editors have featured in the Chronicle 115 university and medical center RT departments. The spotlight articles include department history, major faculty or supervisor initiatives, required curriculums, admission requirements, faculty biographies and photos of faculty members or hospital RT departmental leadership. This is a great resource for new baccalaureate or graduate RT programs and those considering a curriculum change.

Scholarships Information

Most issues include articles on available CoBGRTE scholarships for baccalaureate and graduate students (including scholarships for work on doctorate degrees and research). The editors also include scholarship recipient photo and biography.

Information about Baccalaureate and Graduate RT Programs

Each issue has links to [CoBGRTE website](#) pages where complete listings of all types of RT programs can be found by students and educators. Each school listing has the names of key personnel with links to email, phone, and program website.

Professional Positions and Corporate Sponsors

Professional positions placed on the CoBGRTE website by institutional members are listed in each issue of *The Coalition Chronicle* with a link to detailed information. CoBGRTE institutional members can place advertisements for posted professional positions for free until filled or closed. CoBGRTE corporate members have full-page advertisements for each monthly issue.

Position Papers, Articles on Topics of Interest

Throughout the year articles are published by CoBGRTE on clinical practice, clinical simulations, pandemics, and the pathophysiology of cardiopulmonary diseases. Student awards and research abstract posters, alumni reunions and graduation photos are often included. Summaries of CoBGRTE Round Table Dinner discussions with photos are published by the editors after AARC Summer and Congress meetings. Position papers and press releases are included in the newsletter to clarify CoBGRTE positions on professional concerns.

Editorial Board and Contributors

The CoBGRTE editorial board has worked tirelessly to bring the newsletter to readers each month (see page 30 for more information). Special thanks go to the authors of spotlight, interview, and other types of articles published in the newsletter. Professionals agreeing to be interviewed contribute unselfishly to share lessons learned throughout their careers. This is especially valuable to young RTs just entering practice.

Professional Positions Posted

***Georgia State University, *University of North Carolina-Charlotte, *University of Nebraska Medical Center, *Massachusetts College of Pharmacy and Health Sciences, *Thomas Jefferson University, *Stony Brook University, *University of Missouri, *Liberty University, *St. Catherine University, *University of North Carolina-Wilmington, *Augusta University, *Upstate Medical University-Syracuse, *Norton Healthcare, *University of Virginia Health System**

SAVE THE DATE

**CoBGRTE
ROUND TABLE DINNER**

SUNDAY, JULY 16TH

7:30-10:00 PM

BOATYARD RESTAURANT

3033 NE 32nd Ave

Fort Lauderdale, FL

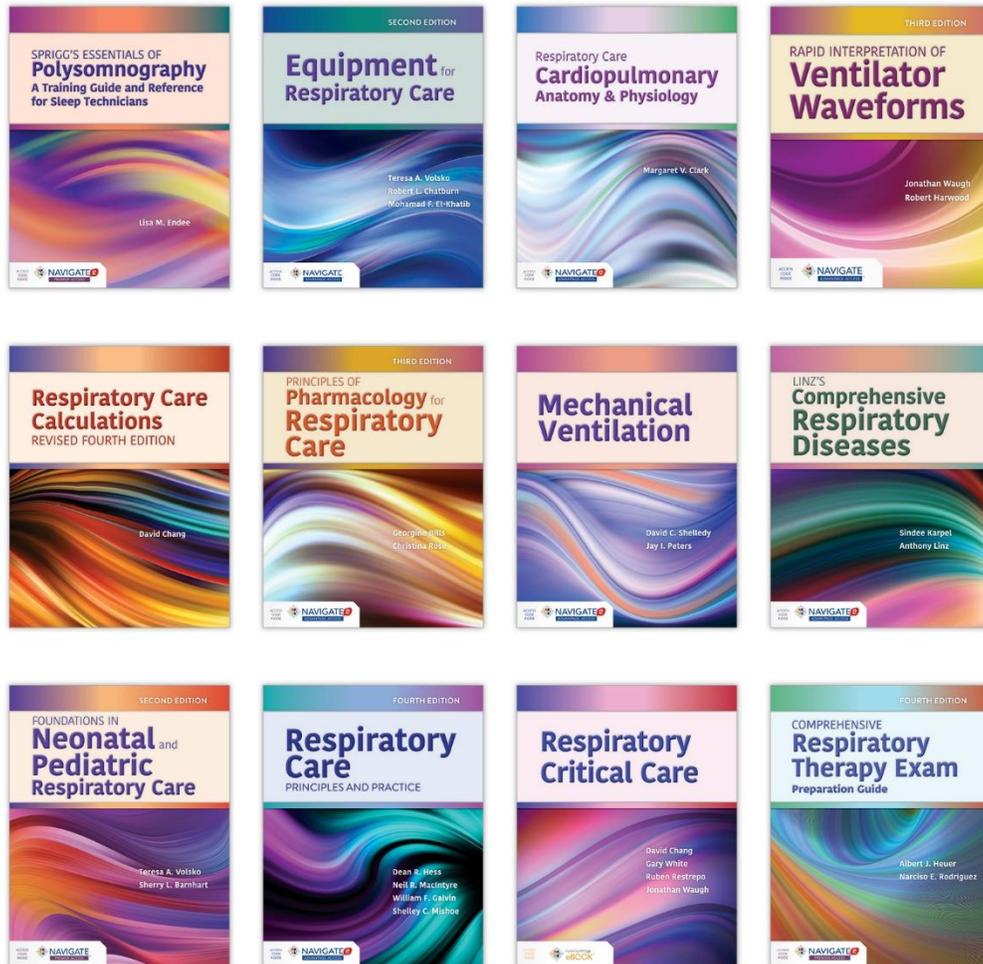
(1.8 miles from the Marriott (35 min walk, 13 min by car).)



RSVP: <http://cobgrte.org/contactcobgrte.html>

Space is limited RSVP early

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Visual Learning



- LED highlights: Each lobe of the lungs, 5 cardiac points, 4 quadrants of the abdomen
- Anatomically correct visualization of lobes, fissures, cardiac points and abdomen in relation to torso
- Write on torso (easy wash off): lesson notes

Auditory Learning



- 73 high definition sounds from real clinical cases
- Cardiac, Respiratory and Bowel sounds
- Sounds transmitted directly into any stethoscope (“Bluescope” device)
- Project sounds with external speaker

Haptic Learning



- Tactilely lifelike skin (proprietary silicone)
- Palpable ribs and landmarks
- Rotatable base (anterior/posterior auscultation)
- Correct stethoscope placement produces corresponding sounds

CoBGRTE Institutional Members

Indiana Respiratory Therapy Consortium
Georgia State University
Weber State University
Boise State University
Bellarmine University
Rush University
Salisbury University
The Ohio State University
Northeastern University
University of Texas Medical Branch - Galveston
Texas State University
University of North Carolina – Charlotte
Louisiana State University Health Science Center – New Orleans
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Valencia College
Middle Georgia State University
University of North Carolina - Wilmington
Respiratory Care Board of California
St. Catherine University
Georgia Southern University
University of Virginia Medical Center
Utah Society for Respiratory Care

CoBGRTE Institutional Members - Continued

Southern Connecticut State University
Boston Children's Hospital
Carlow University
Jacksonville State University
Yosemite College
Newberry College
East Tennessee State University
University of Cincinnati
Liberty University
Ozarks Technical College
North Carolina Respiratory Care Board
Vidant Medical Center
University of Pennsylvania Health System
Loma Linda University
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Southern Illinois University Carbondale
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Texas Southern University
Tennessee State University
SUNY Upstate Medical University
Spokane Community College
York College of Pennsylvania
Northern Kentucky University
Florida Southwestern State College
University of Nebraska Medical Center
University of Michigan – Flint
Augusta University
West Chester University/Bryn Mar Hospital
Thomas Jefferson University
University of Toledo



If you have not already decided to become a CoBGRTE member after visiting www.cobgrte.org, the following are 15 reasons why you should join the coalition.

Reasons Why You Should Become a CoBGRTE Member

1. Award scholarships to baccalaureate and graduate respiratory therapy students.
2. Assist in the development of ASRT to BSRT Bridge Programs.
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 70 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. Mentoring program for new graduates as well as new faculty members.
8. Join colleagues to collectively develop standards for baccalaureate and graduate respiratory therapist education.
9. Develop public relations programs to make potential students aware of baccalaureate and graduate respiratory therapist programs.
10. Help to publicize, among department directors/managers, the differences between respiratory therapists with associate, baccalaureate, and graduate degrees.
11. Access to over 75 Spotlight articles on BSRT and RT graduate programs, and major medical centers.
12. Round table discussion dinners and Meet & Greet member receptions held in conjunction with the AARC Summer Forum and the International Congress.
13. Help to support maintaining a roster and web site for all baccalaureate and graduate respiratory therapist programs.
14. Collaborate with CoARC and AARC to improve respiratory therapy education.
15. Faculty development through financial support and publishing/presenting opportunities.

Editorial Board

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