Respiratory Therapist Program

HEALTH RECORD REQUIREMENT CHECKLIST

How to Submit Documentation:

Forms, vaccination records, lab and imaging reports may be submitted to the Health and Wellness Center as follows. See next page for more information:

- **In Person** . . . . . . . Building 19, Room 177 Appointment may be required.
- **Online** . . . . . . . . Upload pdf files to Dropbox: [https://stccnet.stcc.edu/student_services/healthservices/](https://stccnet.stcc.edu/student_services/healthservices/);
- **Fax** . . . . . . . . . . . (413) 755-6045
- **Release Request** . . . Please visit our office to complete a Health Record Release Form

Due within 10 days of acceptance:

- **Click here for form and instructions:** Criminal Offender Record Information (CORI) Acknowledgement Form. Required annually in order to register for classes.

Due by July 1st or upon acceptance (if after July 1st):

- **Click here to complete this online form:** Student Health History Form
- **Click here to complete this online form:** Authorization to Release Information to Fieldwork Sites Form
- **Click here to complete this online form:** Policies Acknowledgement Form: Student Background Record Check, Drug Screening for Fieldwork Placement, and Latex
- **Click here to complete this online form:** Technical Standards Acknowledgement — Respiratory Therapist

**Tuberculosis Screening:** Results must be dated within 6 months prior to the course start.

- Option A: T-SPOT or Quantiferon-TB Gold IGRA blood test. Recommended for BCG-vaccinated individuals
- Option B: Two - One Step Tuberculin Skin Tests
  1. The first PPD is planted and read 48-72 hours later **and**
  2. A 2nd PPD is planted 7-21 days after the 1st and read in 48-72 hours (to rule out a false negative)

  Only a single plant is required annually thereafter.

**Students with a positive screening** may submit the positive result, a chest x-ray report completed within 12 months of the program start date and complete a **Positive Tuberculosis Screening Questionnaire** form.

**Physical Exam:** Student Physical Exam Attestation — Respiratory Therapist Program form is the only acceptable physical exam form. This form must be completed by a clinician and the exam must be dated within 1 year of the program start and every subsequent 1.5 - 2 years.

Immunization/Immunity Records

- **COVID-19** – evidence of primary series
- **COVID-19** – booster dose (according to CDC guidelines) may be required for fieldwork participation
- **tetanus, diphtheria and pertussis** (TDaP) – evidence of vaccination within the past 10 years
- **measles, mumps, rubella** (MMR) – evidence of two vaccinations or immune titer results for each component
- **hepatitis B** – immune titer lab report (surface antiBODY, anti-HBs) **AND** evidence of three vaccinations
- **varicella** (chickenpox) – evidence of two vaccinations or immune titer results
- **meningitis** – For students age 21 and younger taking 12 credits or more, Menveo/Menactra (aka MenACWY/MCV4); or signed meningitis waiver form.
Respiratory Therapist Program

Additional Requirements:

☑️ Verification of Health Insurance: Fieldwork participants must have insurance. If enrolled in under 9 credits, submit a front and back copy of your health insurance card. Otherwise, students with 9+ credits will be verified through Student Financial Services June 1st through August 1st.

☑️ Influenza – Second year students must submit one vaccine dose before October 1st for fieldwork participation during the flu season (Oct 1-March 31). Documentation must include: Name and DOB, date administered, manufacturer and LOT number, expiration date, Vaccinator's name and title.

☑️ Background Criminal Check and Drug Screening: Students will be provided with ordering instructions from Health Compliance 60-90 days prior to fieldwork start. Drug screening must be completed prior to the assigned deadline. For more information please refer to the BACKGROUND CHECKING AND DRUG SCREENING POLICY FOR FIELDWORK PLACEMENT.

☑️ N-95 Mask Fitting: Students participating in lab and/or fieldwork may be required to complete annual respirator training, medical evaluation and mask fit-testing. This will be scheduled/coordinated through your program chair. Dates/times will be announced in class or by other communication means through the program.

☑️ CPR Certification: American Heart Association BLS Provider CPR Certification: is part of the second semester curriculum unless completed previously. Certification must be maintained throughout enrollment in the program. Submit AHA ecard by immediately following certification for fieldwork clearance. https://ecards.heart.org/student/myecards

For more information: Health and Wellness Center www.stcc.edu/healthservices healthservices@stcc.edu | Phone: (413) 755-4230 | stcc.edu/chat

- All documentation must include full name, date of birth, date administered or date of exam or date of test.
- Lab reports must include the date of test, reference range and result.
- Visit the Health Compliance webpage for resources to aid in submitting documentation in good order.
- The Health Compliance STCCNet portal page contains many of the electronic forms listed above.

Understanding your titer results:

- Positive/Reactive means you have immunity.
- Negative/indeterminate/equivocal means you are not immune.
  1. Submit lab report to the Health and Wellness Center
  2. Obtain revaccination and submit documentation
  3. Submit Health Requirement Deadline Extension Request form. Please provide a dated plan for revaccination (series or booster) and forecasted second titer date.

Students are encouraged to obtain and complete the immunity requirements when applying to the program. By doing so, upon acceptance, the student will be in compliance with these deadlines.

The deadlines for record submission are set forth by the Dean of the School of Health and Patient Simulation and must be submitted on time. Failure to meet the requirements set above may result in removal from the program. Extensions to deadlines are granted in only certain situations (i.e. late admission to a program, in the midst of some vaccination series). Deadline requests must be made in writing to the Director of Health Compliance using the Health Requirements Deadline Extension Request Form. All requests will be reviewed on a case by case basis but are not guaranteed. Students may be excluded from fieldwork or clinical affiliations until requirements are met.
Student Physical Exam Attestation – Respiratory Therapist

(This form is required for students in the Respiratory Therapist program, within the School of Health & Patient Simulation. Other majors and student athletes need to complete a separate form.)

Name: ___________________________  Date of Birth: ___________  STCC ID#: ___________  Exam Date: ___________

Please review the Programmatic Technical Standards (listed on the reverse side of this form), prior to performing the physical exam. These list the essential functions of practical work on campus and fieldwork off campus. It should be noted that under the Americans with Disabilities Act, “A qualified person with a disability is one who can perform the essential function of a job with or without reasonable accommodation.”

Programmatic Technical Standards – Respiratory Therapist (see reverse side for Programmatic Technical Standards)

Based on your examination findings and the Programmatic Technical Standards please indicate the disposition of the student:

☐ Cleared for all classroom/lab/fieldwork participation without restriction

   I have examined the above-named student and reviewed the Programmatic Technical Standards. The student does not present apparent clinical contraindications to fully participate in the program as outlined on this form.

☐ Cleared for participation with the following restrictions/recommendations  Note: Any listed restrictions/recommendations will be reviewed by the College to determine whether there are accommodations that can be made to assist in meeting the technical standards. Students with a qualifying disability under the Americans with Disabilities Act are encouraged to register with the STCC Office of Disability Services (ODS) to determine their eligibility for reasonable accommodations under the law. ODS is located in Building 19, Room 141 and can be reached at (413) 755-4785:

☐ Not Cleared

   Reason ___________________________

Clinician: ___________________________

   (print)  (signature)  (date)  (office phone)
COMMUNICATION
1. Communicate verbally using clear and effective English
2. Write legibly in clear and effective English using correct grammar, punctuation and spelling
3. Quickly and accurately comprehend and follow verbal instructions in English
4. Quickly and accurately read, comprehend and follow written instructions in English
5. Actively participate in group discussions
6. Use communication equipment – telephone, computer, other device used for communication

PHYSICAL SKILLS
Possess fine and gross skills sufficient to handle equipment and provide safe and effective patient care.

1. Exert maximum physical force to lift, push, pull or carry objects up to 50 pounds (oxygen cylinders, beds, patients, or any other type of equipment such as ventilators.
2. Move quickly, freely and safely around the assigned work area and patient care settings
3. Sustain professional activities for up to 8 or more hours
4. Remain standing up to 8 or more hours
5. Remain sitting up to 8 or more hours
6. Reach above shoulder level (to manipulate equipment)
7. Reach below waist level (to manipulate equipment)
8. Move upper and lower extremities, back, hips, and knees without restriction - bend, stoop, and squat 9. Keep hand and arm steady while moving arm or while holding arm and hand in one position
9. Make precisely coordinated movements of the fingers of one or both hands to grasp, manipulate, or assemble very small objects
10. Capable of walking up and down stairs in order to respond to emergency situations

OBSERVATION AND SENSORY SKILLS
1. Hear, comprehend and interpret conversation and sounds not solely based on visual cues (including alarms, monitors, faint sounds, such as heart and breath sounds, taking blood pressure)
2. Ability to see details at close range (within a few feet of the observer) and at a distance.
   a) Function efficiently in various degrees of light, from dark to bright lighting
   b) Differentiate colors, varying shades of same color, and shades of black, white and gray
   c) Read fine print and hand writing
3. Detect and distinguish odors from clients and environment
4. Distinguish textures, degrees of firmness, temperature differences, pulse rate and vibrations; feel anatomical landmarks and veins
5. Distinguish and describe patient affect, body language and physical responses which the patient cannot verbally relay (i.e. facial expressions, sweating, trembling, color change, bleeding, etc.)