

Texas Southern University
College of Pharmacy and Health Sciences
Health Sciences Department
Respiratory Therapy Program

**APPLICATION DEADLINE:
FRIDAY, November 20, 2009**

Please submit the following application documents to Program advisors:

1. Application Form
2. Current Transcript
3. Transferred Credits (As evaluated by Texas Southern University Registrar)
4. Current Enrollment (Fee Receipt or Transcript)
5. Three (3) Evaluation Forms (see attached)
6. Narrative (1-2 pages described your background and your interests Respiratory Therapy Profession)
7. Entrance Exam Fee (Due on date of examination. See schedule of exam in Health Sciences main office.)

*** ALL APPLICATION DOCUMENTS SHOULD BE PLACED IN A LEGAL-SIZED ENVELOPE, WITH THE APPLICANTS NAME VISIBLE**

**Applicant Interviews will be conducted on: Wednesday, December 2, 2009
Thursday, December 3, 2009**

Applicants will be notified of application status by **Dec. 31, 2009**

Entrance Exam Information

- *Sign up with program Advisors via Email at taylor_aj@tsu.edu or allen_rg@tsu.edu*
- ***Entrance Exam Dates are : Tuesday October 6 or November 8, 2009. NO Additional dates will be added. .***
- *Examination Registration begins at 9:30 a.m. All exam participants should report to Nabrit Hall room 203 no later than 9:30 a.m. Please bring a money order (no checks or cash) for \$ 50.00 payable to Lambda Beta Honor Society.*
- ***Examination begins promptly at 9:30 am. The exam lasts approximately 2 ½ hours.***

Revised 08/25/09

- *The Educational Resource Testing Bureau (www.hobet-success.com) for more information).*

(STUDENTS: Read Carefully)
Technical Standards

The technical standards have been established through consideration by faculty and consultation with the following sources: The Vocational Rehabilitation Act; The American Disabilities Act; Guide for Occupational Information; Dictionary of Occupational Titles; and the Occupational Skills Standards Project from the National Health Care Skills Standards Projects.

Physical Demands:

Candidates must be able to display the medium strength rating, as described by the Dictionary for Occupational Titles, which reflects the ability to exert 20 to 50 pounds of force occasionally (occasionally: activity or condition exists up to 1/3 of the time), and/or 10 to 25 pounds of force frequently (frequently: activity or condition exists from 1/3 to 2/3 of the time), and/or greater than negligible up to 10 pounds of force constantly (constantly: activity or condition exists 2/3 or more of the time) to move objects.

Motor Skills:

Must possess sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other evaluation procedures. Candidates must be able to execute motor movements including the physical/dexterity strength to stand and ambulate and possess the physical/dexterity strength to lift and transfer patients. Candidates must also have the physical strength to perform cardiopulmonary resuscitation.

Respiratory therapy procedures require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision. For this reason, candidates for admission to the Program of Respiratory Therapy must have manual dexterity and the ability to engage in procedures involving grasping, pushing, pulling, holding, manipulating, extending and rotating.

Sensory/Observational Skills:

Candidates must be able to observe demonstrations and participate in laboratory experiments as required in the curriculum. Candidates must be able to observe patients and be able to obtain an appropriate medical history directly from the patient or guardian. Such observation requires the functional use of vision, hearing, and other sensory modalities. Candidates must have visual perception which includes depth and acuity.

Communication Skills:

Candidates must be able to communicate in English effectively and sensitively with patients. In addition, candidates must be able to communicate in English in oral and handwritten form with faculty, allied personnel, and peers in the classroom, laboratory, and clinical settings. Candidates must also be sensitive to multicultural and multilingual needs. Such communication skills include not only speech, but reading and writing in English. Candidates must have the ability to complete written assignments and maintain written records. Candidates must have the ability to complete assessment exercises. Candidates must also have the ability to use therapeutic communication, such as attending, clarifying, coaching, facilitating, and touching. These skills must be performed in clinical settings, as well as the didactic and laboratory environments.

Intellectual/Conceptual, Integrative, and Qualitative Skills:

Candidates must have the ability to measure, calculate, reason, analyze, and synthesize data. Problem solving and diagnosis, including obtaining, interpreting, and documenting data, are critical skills demanded of respiratory therapists which require all of these intellectual abilities. These skills allow students to make proper assessments, sound judgments, appropriately prioritize therapeutic interventions, and measure and record patient care outcomes. Candidates must have the ability to learn to use computers for searching, recording, storing, and retrieving information.

Behavioral/Social Skills and Professionalism:

Candidates must demonstrate attributes of empathy, integrity, concern for others, interpersonal skills, interest, and motivation. Candidates must possess the emotional well-being required for use of their intellectual abilities, the exercise of sound judgment, the prompt completion of all responsibilities attendant

to the evaluation and care of patients, and the development of mature, sensitive, and effective relationships with patients. Candidates must be able to adapt to ever-changing environments, display flexibility, and learn to function in the face of uncertainties and stresses which are inherent in the educational process, as well as the clinical problems of many patients.

Candidates must be able to maintain professional conduct and appearance, maintain client confidentiality and operate within the scope of practice. Candidates must also have the ability to be assertive, delegate responsibilities appropriately, and function as a part of a medical team. Such abilities require organizational skills necessary to meet deadlines and manage time. **Candidates MUST be able to pass drug/alcohol testing as well as Criminal Background Check.**

Comprehensive Exam/Exit Exam /Senior Level Courses Policy Notification

HSRT 440 – Management I

***The Prerequisite for enrollment in this course is a Certificate of Equivalency (Eligibility for Program Exit Exams).** Each student that has received a Certificate of Equivalency and is enrolled in HSRT 440 is required to apply for, pay for, attempt and successfully complete (pass) the Certified Respiratory Therapist Exam administered by the National Board for Respiratory Care (NBRC) within the confines of the 440 management course. **Students will submit NBRC applications and fees for the exams and all students will present a copy of the confirmation notice of eligibility received from the National Board For Respiratory Care (NBRC) to the instructor of the management course.** Students will also present examination results to program advisors immediately following examination attempts. Any student that fails to adhere to this procedure will receive the grade of **(I) incomplete** until full compliance has been documented.

HSRT 441 – Management II

***Prerequisites for enrollment in HSRT 441 are (1) CRT credential granted from the NBRC and (2) registry eligibility.** Students are required to apply for, pay for, attempt and pass the NBRC Written Registry and Clinical Simulation Examinations. **Students will submit NBRC applications and fees for the exams and will present a copy of the confirmation notice of exam eligibility (received from the NBRC) to the HSRT 441 instructor.** Students will also present examination results to program advisors immediately following examination attempts. Students who fail to complete the exams will receive the grade of **(I) incomplete** until full compliance has been met and documented.

Student Signature

*** Signing here reflects both an awareness and understanding of all above technical standards and program policies governing comprehensive/exit exams and senior level courses.**

**Texas Southern University
College of Pharmacy and Health Sciences
Respiratory Therapy Program
Recommendation Form**

Applicant's Name: _____

TO THE RECOMMENDER: The above-named student has applied for admission to the Respiratory Therapy Program. Someone who has previously taught this student and has known the applicant for at least one-year period must complete this section. We appreciate your frank appraisal of the student. Your recommendation may be given to the student in a sealed envelope or you may mail it to: *Texas Southern University College of Pharmacy and Health Sciences **Respiratory Therapy Program** 3100 Cleburne Houston, Texas 77004.*

1. Please evaluate the applicant on following characteristics by checking the appropriate number. The applicant should be rated on a scale of 1-10 (with "1" representing the lowest rating, and "10" representing the highest rating. If you are unable to rate a particular characteristic, please enter "NA" which will indicate unknown.

| CHARACTERISTIC | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|
| Personal Appearance | | | | | | | | | | |
| Academic Ability | | | | | | | | | | |
| Self-Confidence | | | | | | | | | | |
| Work Habits | | | | | | | | | | |
| Motivation Towards Respiratory Therapy | | | | | | | | | | |
| Seriousness of Purpose | | | | | | | | | | |
| Potential for Contribution to Profession | | | | | | | | | | |
| Resourcefulness and Initiative | | | | | | | | | | |
| Emotional Maturity | | | | | | | | | | |
| Adaptability | | | | | | | | | | |
| English Proficiency | | | | | | | | | | |

2. How long have you know this applicant? _____
3. In what capacity have you known the applicant? _____
4. Your best estimate of the applicant's overall potential for success in the Respiratory Therapy program.
 _____ Poor _____ Below Average _____ Good _____ Outstanding

Additional Comments:

Recommender's Printed Name _____

Recommender's
Signature _____ Date _____

Recommender's
Title _____ Employer _____

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10. How long have you know this applicant? _____
11. In what capacity have you known the applicant? _____
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