Important Reminders
Acceptance into Dakota State University does not guarantee acceptance into the clinical portion of the Respiratory Care Program. Acceptance is based on criteria described in this handbook.

You must maintain at least a C in all classes, and an overall GPA of at least 2.50, to ensure continuation in the program.

Students are not accepted into the Respiratory Care Program until they are notified by the Program Director.

All information submitted during the application process must be complete and correct. Any false answer or statements or implications made in this application or any required document shall be considered sufficient cause to deny acceptance to the Respiratory Care Program or for suspension if already accepted.

Dakota State University is an Equal Opportunity Education Institution.

For questions regarding the respiratory care program (605 prefix)

**Program Director**
Bruce Feistner, MSS, RRT
322-8613
bruce.feistner@dsu.edu

**Director of Clinical Education**
Mary Reinesch, BA, RRT
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mary.reinesch@dsu.edu

**Site Coordinator (Rapid City)**
Valorie Stalcup, BS, RRT
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valorie.stalcup@dsu.edu

**Clinical Instructor (Rapid City)**
Hui-Ling Lin, MS, RRT
719-6092
hui-ling.lin@dsu.edu

**Clinical Instructor (Sioux Falls)**
Jill Olson, BS, RRT
322-8614
jill.olson@dsu.edu

**DSU Toll-Free**
1-888-DSU-9988
(1-888-378-9988)

**DSU College of Arts & Sciences**
Natural Sciences 256-5194
Arts/Humanities 256-5270

**DSU Enrollment Services**
Admissions 256-5139
Registrar 256-5144
Financial Aid 256-5152

**Respiratory Care Departments**
Avera McKennan 322-8605
Rapid City Regional 719-8307
Sanford Health 333-6508

**Medical Director**
Ashraf Elshami, MD
Dakota State University Respiratory Care Program
Essential Functions / Core Performance Standards

Review the list of skills below. If you are unable to meet the standard(s), even with correction (example eyeglasses, hearing aids) on any of the items below, list those on the page following the descriptions.

The Respiratory Care Program complies with the American with Disabilities Act (ADA), and consistent with the ADA, the attached Essential Functions/Core Performance Standards Worksheet provides the framework to relate functional ability categories and representative activities/attributes to any limitations/deficits in functional abilities. These standards shall be used by the Respiratory Care Program in combination with the professional scope of practice, job analysis, other resources, and expert consultation to make decisions related to the ability of the respiratory care student to perform the essential functions of respiratory care.

If a prospective student is or becomes unable to meet the required Essential Functions/Core Performance Standards, the Respiratory Care Program in consultation with DSU’s ADA Coordinator will determine, on an individual basis, whether or not reasonable accommodations can be made that would permit the student to meet these Essential Functions /Core Performance Standards and thus, to continue in the program.

Please note “Skills tied to” under each of the sections is not intended to be a complete listing of skills but rather as an example of a skill for which that ability is linked.

Please carefully review the 16 items and complete the page following the descriptions.

1. Gross motor ability
   Move within confined spaces
   Sit and maintain balance
   Stand and maintain balance
   Reach above shoulders
   Reach below waist

   Linked skills Function in an ICU environment move about in an ICU room in order to perform procedures on the patient. Must also read patient chart, equipment settings, and/or equipment displays. Sit to record findings. Change equipment settings above head and below waist.

2. Fine motor ability
   Pick up objects with both hands
   Grasp small objects with both hands
   Write clearly and neatly with pen or pencil
   Type on a keyboard
   Pinch/squeeze or pick up objects with fingers of both hands
   Twist knobs with both hands
Must have adequate manual dexterity as to be capable of maintaining sterility

*Linked skills* Lift medication vials to eyes to read. Squeeze medication vials to empty. Squeeze Ballard suction catheter button. Grasp, hold and read small instruments such as volume measuring devices. Write in patient chart. Record patient data in record. Change settings on equipment by turning knob and observing change.

### 3. Physical Endurance
Stand at client’s side during procedure
Sustain repetitive movements (example chest compressions in CPR)
Maintain physical tolerance (continue tasks throughout a shift)
Work and complete tasks at a reasonable pace

*Linked skills* Stand and perform repetitive procedures on patients such as Chest Physical Therapy and CPR. Repeat this procedure periodically throughout a shift.

### 4. Physical Strength
Lift 25 pounds
Move light objects up to ten pounds
Restrain combative client
Carry equipment/supplies
Squeeze with hands (example use of a fire extinguisher)
Able to push/roll 60 pounds
Move heavy object weighing from 10-50 pounds.
Use upper body strength

*Linked skills* Assist patient from bed to chair. Hoist patient up in bed. Move patient from stretcher to bed and back. Carry medications, pulse oximeter, stethoscope or other equipment to patient room. Push ventilator or other heavy equipment from respiratory care department to patient room. Move other equipment such as pulse oximeter or IPPB machine. Lift equipment from bed height to shelf height above chest level.

### 5. Mobility
Twist
Bend
Stoop/squat
Move quickly
Climb ladders/stools/stairs
Walk

*Linked skills* Turn to change settings on monitor while standing at patient bedside. Bend to change equipment settings on floor, at knee level, waist level, chest level, eye level, above head. Gather equipment and manually resuscitate patient without delay. Make rapid adjustments if needed to ensure patient safety. Make way to patient room if an emergency is called using stairs.

### 6. Hearing
Hear normal speaking level sounds
Hear faint voices
Hear faint body sounds (example breath and heart sounds)
Hear audible alarms
Hear telephones
Hear sounds with stethoscope

Linked skills  Listen to patient breath sounds to determine if patient is breathing. Listen to heart sounds to determine if heart is beating. Determine the intensity and quality of patient breath sounds in order to help determine a diagnosis. Hear audible alarms such as a ventilator alarm. Hear overhead pages to call for emergency assistance.

7. Visual
Visually assess clients
See object up to 20 inches away
See object more than 20 feet away
Use peripheral vision
Distinguish color
Distinguish color intensity
See emergency lights/lamps

Linked skills  Read patient chart to determine correct therapy. Visually assess patient color to assess for hypoxia. Read settings on monitors and other equipment. Visually assess for changes. Confirm settings visually such as with ventilator display.

8. Tactile
Feel vibrations (example pulses)
Detect temperature
Feel the difference in surface characteristics
Feel the differences in sizes, shapes (example palpate artery/vein)
Detect environmental temperature

Linked skills  Assess patient by feeling for pulse, temperature, tactile fremitus, edema, subcutaneous emphysema.

9. Smell
Detect odors from client
Detect smoke
Detect gas or noxious smells

Linked skills  Assess for noxious odors originating from the patient or environment (example gas leak or smoke)

10. Reading
Read and interpret physicians’ orders
Read and understand written documents
Read very fine or small print

Linked skills Read and interpret physician orders, and physician, therapist and nurse’s notes. Read from a computer monitor screen. Gather data accurately, and in a reasonable amount of time to ensure safe and effective patient care relative to other care givers.

11. Arithmetic
Read and understand columns of writing (example flow sheets)
Read digital displays
Read graphic printouts
Calibrate equipment
Convert numbers to metric
Read graphs (vital sign sheets)
Tell time
Measure time (duration)
Count rates (example pulses, breathing rate)
Use measuring tools (example thermometer)
Read measurement marks (scales)
Perform basic arithmetic functions add, subtract, multiply, divide
Compute fractions
Use a calculator
Record numbers (example chart observed parameters)

Linked skills Read and interpret patient graphics charts and graphic displays. Perform basic arithmetic functions in order to calculate minute ventilation, convert temperature, correctly place graduated tubing, and other functions.

12. Emotional Stability
Establish therapeutic boundaries
Provide client with appropriate emotional support
Adapt to changing environment/stress
Deal with the unexpected (example crisis)
Focus attention on task despite distractions
Monitor own emotions
Perform multiple responsibilities concurrently
Handle strong emotions (example grief)
Show appropriate compassion through communications

Linked skills Provide for safe patient care despite a rapidly changing and intensely emotional environment. Perform multiple tasks concurrently, example delivery of medication or oxygen in one room while performing an arterial blood gas in another such as in an emergency room environment. Maintain enough composure to provide for safe and effective patient care despite crisis circumstances.

13. Analytical Thinking
Transfer/extrapolate knowledge from one situation to another
Process information
Evaluate outcomes
Problem solve
Prioritize tasks
Use long and short term memory

*Linked skills* Evaluate different sources of diagnostic information to help arrive at a patient diagnosis. Evaluate priorities in order to provide for the most appropriate care. Appropriately evaluate data in order to notify physician and nurses when necessary.

14. Critical Thinking
Identify cause-effect relationships
Plan/control activities for others
Synthesize knowledge and skills
Sequence information

*Linked skills* Evaluate different sources of diagnostic information to help arrive at a patient diagnosis and treatment. Evaluate data in order to formulate an appropriate action plan.

15. Interpersonal
Negotiate interpersonal conflict appropriately
Respect differences in clients
Establish rapport with clients
Establish rapport with co-workers
Work effectively with physicians, staff, clients and their families

*Linked skills* Communicate effectively with disagreeable patients, family, doctors, nurses and other staff in order to meet therapeutic goals for the patient.

16. Communication
Teach (example client and family)
Explain procedure
Give oral reports
Interact with others
Speak on the telephone
Direct activities of others
Convey information through writing (example progress notes)
Speak clearly and distinctly

*Linked skills* Communicate effectively and appropriately with doctors, nurses, patients, family, and other staff in order to provide for most effective and efficient patient care.
Dakota State University Respiratory Care Program
Student/Applicant Declaration on Essential Functions

Printed Name

I have read the description of Essential Functions for the Respiratory Care Program. To the best of my knowledge, I am able to perform, or will be able to learn to perform, all of the functions listed.

Signature __________________________ Date __________________________

I have read the description of Essential Functions for the Respiratory Care Program, and I am able to perform, or will be able to learn to perform, all of the functions except for those I have listed below. I understand that it is my responsibility to contact the appropriate office at my university for assessment and assistance.

Signature __________________________ Date __________________________

Print and return this completed page, as soon as possible, to Bruce Feistner, MSS, RRT, Respiratory Care Program Director, Dakota State University, 820 N Washington Ave, Madison, SD 57042-1799.
AARC Position Statement on Respiratory Therapist Education

This is at http://www.aarc.org/resources/position_statements/education.html.

Competency Requirements for the Provision of Respiratory Care Services

This is at http://www.aarc.org/resources/position_statements/comp.html.

Introduction
Respiratory Care is the health care discipline that specializes in the promotion of optimum cardiopulmonary function and health. Respiratory Therapists apply scientific principles to prevent, identify, and treat acute or chronic dysfunction of the cardiopulmonary system. Knowledge of the scientific principles underlying cardiopulmonary physiology and pathophysiology, as well as biomedical engineering and technology, enable respiratory therapists to effectively assess, educate, and treat patients.

As a health care profession, Respiratory Care is practiced under medical direction across the health care continuum. Respiratory Care is specifically focused on the assessment, treatment, management, control, diagnostic evaluation, education, and care of patients with deficiencies and abnormalities of the cardiopulmonary system as well as on the prevention of the development of these deficiencies. Critical thinking, patient/environment assessment skills, and evidence-based clinical practice guidelines enable respiratory therapists to develop and implement effective care plans, patient-driven protocols, disease-based clinical pathways, and disease management programs. A variety of venues serve as the practice site for this health care profession including, but not limited to acute care hospitals, diagnostic laboratories, rehabilitation and skilled nursing facilities, patients' homes, patient transport systems, physician offices, convalescent and retirement centers, educational institutions, and wellness centers.

The respiratory care programs at Dakota State University (DSU) are designed as either an associate or bachelor’s degree in respiratory care. The first fall and spring semesters of the A.S. program are spent on a university campus completing general
education requirements. After the first year’s classes are completed, the student has class and clinical experiences at the primary clinical affiliate hospitals (Avera McKennan and Sanford Health in Sioux Falls or Rapid City Regional Hospital in Rapid City). Both semesters of the third year and the fall semester of the fourth year are spent on a university campus, and the fourth spring semester is a clinical semester.

Immediately upon graduation from either the A.S. or B.S. program, you may begin employment as a graduate therapist. You are immediately eligible to take the entry level examination of the National Board for Respiratory Care to become a Certified Respiratory Therapist. Following certification, you are eligible to take the advanced written and simulation examinations of the NBRC to become a Registered Respiratory Therapist.

Program Goal
To prepare competent Respiratory Therapists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.

Glossary

AARC  American Association for Respiratory Care, the national professional organization for respiratory care practitioners.

Advanced standing  A method of obtaining credit for a portion of the curriculum without having to participate in all of the scheduled activities.

Certified  A term referring to the credential awarded by the NBRC signifying that a person has demonstrated entry level competency in the practice of respiratory care.

CoARC  Committee on Accreditation for Respiratory Care. The organization that accredits respiratory care programs.

Employee Handbook  A manual given to employees of the primary clinical affiliates containing the rules and regulations of those institutions.

NBRC  National Board for Respiratory Care. The organization whose function it is to verify the competence of respiratory care practitioners through examinations.

Primary clinical affiliates  The hospitals where the students receive their clinical education – Avera McKennan, Sanford Health, and Rapid City Regional Hospitals.
Registered A term referring to the credential awarded by the NBRC to graduates of a respiratory therapist program (or the equivalent) recognizing their advanced mastery of respiratory care. One becomes eligible to attempt the Registry examination following satisfactory completion of the entry level exam.

Respiratory Care Program Curriculum The classes required for completion of the A.S. and B.S. respiratory care programs. This includes required classes both on campus and in the clinical portion of training.

SDSRC The South Dakota Society for Respiratory Care. The regional branch of the AARC representing South Dakota.

Therapist A term used to describe the A.S. or B.S. programs, students in those programs, or graduates of such programs. Therapists may be employed in hospitals, clinics, or other health care facilities. After gaining clinical experience they may become Registered and move into such positions as instructor, supervisor, program director, or department head. A therapist is also known as a Respiratory Care Practitioner.

Accreditation
Dakota State University’s Respiratory Therapist Program is fully accredited by the Committee on Accreditation for Respiratory Care (CoARC), a component of the Commission on Accreditation of Allied Health Education Programs (CAAHEP). This accreditation enables program graduates to take the credentialing examinations of the NBRC.

Admissions
It is the policy of the respiratory care program to ensure equitable consideration of all applicants, to assist the applicant in determining if a suitable career choice has been made, and to ensure the best possible chance of success for each student selected to enter the program. Admission to DSU does not guarantee acceptance into the respiratory care program. University acceptance and RC Program acceptance are two separate entities. Refer to the DSU catalog for university admission requirements.

There is a limit of sixteen students in the Sioux Falls clinical portion of the curriculum, and ten students in the Rapid City clinical portion of the curriculum after the first year of the A.S. program. Admission to the clinical portion is granted to the students with the highest calculated GPAs from the 30 credits of the previous fall and spring semester’s respiratory care curriculum, with a minimum GPA of 2.50. There must not be any individual grades lower than a C in the curriculum. The selection process may also involve an interview with the respiratory care admissions committee.
The **deadline for application to the summer term is March 1**. Applications received after that date will be put on a waiting list.

There is a **limit of eight students in Sioux Falls and six in Rapid City** in the fourth year spring clinical semester of the program. Admission to this clinical semester is granted to the students with the highest cumulative GPAs from the A.S. program classes and work completed in the B.S. curriculum to date, with a minimum GPA of 2.50. Students **must have attained the RRT** and have all prior coursework completed before beginning the fourth spring clinical semester.

### Application Procedures

- Obtain an application form and return it to the Enrollment Services Center in Vermillion, or to the Registrar’s Office at DSU when you have it completed. Official transcripts of high school and college work must be included.

- Any student accepted by Dakota State University may enroll in the first fall or spring’s respiratory care classes at any university if space permits. This does not guarantee later acceptance into the respiratory care program.

- Any student who retakes *more than 1* course to achieve the minimum grade requirement of a B will only be accepted into the respiratory care program on a probationary basis. Please refer to Satisfactory Student Performance on for related information.

- Acceptance into the University is based on previous grades, quality of preparation, admission tests, ACT, and high school and college grades.

- Complete the physical exam and immunization form by May 1.

- In order to enroll in some required courses, it may be necessary to pass certain basic Math and English skills tests which are given prior to or during registration. Students not passing these tests will be required to take developmental courses in those areas prior to enrolling in regular classes; therefore entrance into the program may be delayed.

- For acceptance into the program’s clinical portion, see paragraph 2 of the Admissions Policy.

### Criminal Background Check

Successful completion of a criminal background check is required prior to acceptance into the clinical portion of training. This is to be completed late in the spring semester immediately prior to starting clinical training. The cost is $19.95 and is paid by the student.
Go to http://www.sentrylink.com and click the Criminal Search button on the top of the screen. On the next page, fill in the boxes under National Criminal Background Check & Sex Offender Check and follow the directions.

Print 2 copies of the results, keep 1, and send the other copy to Bruce Feistner, Respiratory Care Program Director, Dakota State University, 820 N Washington Ave, Madison, SD 57042-1799.

Advanced Standing
Advanced Standing may be achieved in one of the following three ways

**Credit for Prior Learning:** Students having related work that they feel is equivalent to sections of the program curriculum are encouraged to apply in writing for credit to their assigned advisor according to the procedure outlined in the university catalog. Credit may be granted in accordance with current university policy. The student will be required to provide course content and other supporting materials.

**Transfer Credit**” Official evaluation of transfer credit will be carried out only after receipt of the completed application to the university. Equivalent courses taken at other approved colleges or accredited respiratory care programs may qualify for direct credit transfer with sufficient supporting documentation.

**Credit by Examination:** DSU participates in the College Level Examination Program (CLEP) that is designed to measure what people have learned through independent study, on-the-job training, reading, travel and non-credit courses. This mechanism applies to pre-clinical coursework only. Course credit is given upon successful completion of the test. This may be arranged through the instructor of the course according to the policy of the institution. A fee will be charged for each examination attempted.

Advisors
You will be assigned an advisor upon declaring respiratory care as your major. You should arrange an appointment with your advisor prior to each registration/preregistration session, and to address questions or concerns. Students are encouraged to meet with their advisor at regular intervals or whenever the need arises. Your advisor is able to assist you in decisions about course selection, academic difficulties, career modifications, job placement, etc.

Freedom in Learning
Students are responsible for learning the content of any course of study in which they are enrolled. Under Board of Regents and University policy, student academic performance shall be evaluated solely on an academic basis and students should be free to take reasoned exception to the data or views offered in any course of study. It has always been the policy of Dakota State University to allow students to appeal
the decisions of faculty, administrative, and staff members and the decisions of institutional committees. Students who believe that an academic evaluation is unrelated to academic standards but is related instead to judgment of their personal opinion or conduct should contact the dean of the college which offers the class to initiate a review of the evaluation.

**Satisfactory Student Performance**

Once accepted into the respiratory care curriculum, continuance in the program will be contingent upon the student maintaining satisfactory academic and clinical progress.

_Satisfactory academic progress is defined as_

- No failing grade in any course
- A grade of C or better in each course in the program curriculum and an overall GPA of at least 2.50 on a 4.00 scale.

If a student obtains an unsatisfactory grade (D or F) in any class in the program curriculum, then repeats it, the grade in this repeated class must be at least a B. Any course in the respiratory care curriculum may be repeated _only once_ to remove an unsatisfactory grade. If a B is _not_ achieved in any repeated course, the student will not be allowed to continue in the respiratory care program.

Individual course syllabi give details on grade determination, content, and requirements for each course.

_Satisfactory clinical progress is defined as_

- A grade of C or better in all clinical courses
- Behavior appropriate to and consistent with that expected of employees at the clinical affiliates (refer to Employee Handbook of the clinical affiliate to which you are assigned at that time)
- Completion of all assigned clinical rotations and other assignments (e.g., volunteer time) as scheduled by the Director of Clinical Education or other faculty members
Unsatisfactory Student Performance

Cheating Cheating and other forms of academic dishonesty run contrary to the purpose of higher education and will not be tolerated. All forms of academic dishonesty will result in the student being immediately suspended from the program.

A student’s performance that does not meet the criteria as defined in the university catalog will receive disciplinary action as follows

Probation This indicates that the student’s performance has not met the established guidelines and that unless the performance improves, that student will be suspended from the program. There are two general types of probation: Academic probation, based upon the student’s grades; and disciplinary probation, based upon the student’s behavior.

The student may be placed on one or more of the following types of probation

1. University Academic or Disciplinary Probation refer to the student handbook or university catalog for details.

2. Program Academic Probation this action is indicated by a student’s grades that may lead to suspension from the program. This classification would also be applied to a student readmitted to the program after Academic Suspension.

3. Program Disciplinary Probation this action is indicated by a student’s behavior that may lead to suspension from the program. This classification would also be applied to a student readmitted to the program after Disciplinary Suspension.

The probation document shall specify to the student the steps necessary to be returned to good standing.

Note: Students on probation are encouraged to meet with the Financial Aid Office as soon as possible to ascertain the status of their financial aid.

Suspension This indicates that the student is no longer considered to be in the respiratory care program and/or the university depending on the type of suspension. Students suspended from the university are automatically suspended from the program; however, a student suspended from the program is not suspended from the university unless notified.

1. University Suspension refer to the student handbook or university catalog for details.

2. Program Suspension action taken when the student fails to meet criteria established in a previous program probation meet the criteria established in this handbook for satisfactory performance.
Students will be notified of their suspension from the program immediately following the semester that they fail to meet the criteria or whenever disciplinary infractions occur that would warrant suspension (refer to reasons for “Immediate Dismissals” in the hospital’s Employee Handbook). Individual students that are refused access to either primary clinical affiliate hospital for reasons specified by hospital administration will be given automatic program suspension until the problem is resolved.

**Appeal** Any decision that the student feels is unjustified may be appealed to the next highest authority. The original decision will stand unless reversed in response to the appeal. The appeal must be made in writing within five working days of notification of the decision in question. See the university catalog for further details.

**Graduation Eligibility**
To be eligible for graduation from the program, the student must

- Apply for graduation by the deadline specified in the academic calendar.
- Complete all financial and other obligations to the university and clinical affiliates.
- Achieve a grade of C or greater in each course in the program curriculum.
- Have an overall GPA of at least 2.50 on a 4.00 scale.

**Associations**
AARC, SDSRC and NBRC The national professional organization for respiratory care is the American Association for Respiratory Care (AARC), and the South Dakota Society for Respiratory Care (SDSRC) is the state affiliate. The student receives the association’s journals, society newsletters, and other benefits such as reduced registration fees at local and national meetings. The National Board for Respiratory Care (NBRC) is the agency responsible for administering the entry level and advanced practitioner credentialing examinations following graduation.

Dakota State University Respiratory Care Student Associations Students in the respiratory care programs are encouraged to actively participate in this association to improve the quality of their educational experience at the university and promote the field of respiratory care. This student organization is for the benefit of students and can only be as effective as every student makes it. There are Madison, Sioux Falls, and Rapid City chapters.
**Drug-Free Environment**

It is the policy of Dakota State University to create and maintain a drug-free work and study environment. The improper use of controlled substances or alcohol is inconsistent with the professional and responsible behavior we expect of faculty, staff and students. The employees and students of DSU are strictly prohibited from being under the influence of or engaging in the unlawful or unauthorized manufacture, distribution, sale, possession, or use of alcohol or a controlled substance on University-owned or controlled property, being present in any University-controlled area where such activity is believed to take place, or as part of any of its activities or employments. For further information, please refer to the link [http://www.departments.dsu.edu/hr/newsite/policies/027400.htm](http://www.departments.dsu.edu/hr/newsite/policies/027400.htm).

It is not DSU’s intent to intrude into the private lives of employees or students; however, the effect of drug and alcohol abuse on safety, work quality, increased medical expenses and lost productivity require this policy.

**Program Expenses/Financial Aid**

In addition to regular college tuition and fees, room and board, etc, the student should be prepared for any other costs such as nametag, safety glasses, calculator, stethoscope, watch, and uniforms. Other questions concerning financial aid should be directed to the campus Financial Aid Office.

**Housing**

**General Policy:** The South Dakota Board of Regents requires all unmarried students, during the first two years from the time they were graduated from high school and who are enrolled on a main campus for six or more credits hours, to reside on campus. A student may obtain an exemption from this requirement if they live full-time with their parents.

**Housing during clinical training:** Because there are no DSU dormitory facilities in Sioux Falls or Rapid City, students required to live in campus housing may locate housing on their own, and a release from housing requirements will be obtained for those students. Students are required to have telephone service (either cell or landline) during the clinical training portion of the program.
ADA
If there is any student in any class who, due to a disability, has need for non-standard note taking, test taking, or other course modification, please contact the DSU ADA Coordinator, Keith Bundy, 256-5121, located in the lower level of the Trojan Center, as soon as possible. The web site for requesting accommodations is http://www.departments.dsu.edu/disability_services/. Please be sure to fill out this form and be able to provide documentation verifying your disability.

ADA Educational Programs: It is the policy of Dakota State University to comply with all federal and state requirements of the Americans with Disabilities Act, the Rehabilitation Act of 1973 and other similar statutes and regulations as promulgated federally and by the State of South Dakota. To this end, the university has formed a committee (ADA Educational Programs Committee) whose purpose is to help ensure individuals with disabilities have the full benefit of educational programs offered by the university in compliance with the above laws. This policy is part of the university’s total response to the Americans with Disabilities Act.
# Curriculum Listings

## C U R R I C U L U M   L I S T I N G S

**Associate of Science degree**

<table>
<thead>
<tr>
<th>Fall Semester – 1st Year</th>
<th>Cr.</th>
<th>Fall Semester – 3rd Year</th>
<th>Cr.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOL 151 General Biology I</td>
<td>4</td>
<td>SGE Arts and Humanities</td>
<td>6</td>
</tr>
<tr>
<td>CHEM 106 Chemistry Survey or</td>
<td></td>
<td>SGE Social Science</td>
<td>3</td>
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<tr>
<td>CHEM 112 General Chemistry I</td>
<td>4</td>
<td>PSYC 101 General Psychology</td>
<td>3</td>
</tr>
<tr>
<td>CSC 105 Intro to Computers</td>
<td>3</td>
<td>WEL 100 Wellness for Life</td>
<td>2</td>
</tr>
<tr>
<td>MATH 102 College Algebra</td>
<td>3</td>
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</tr>
</tbody>
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**Spring Semester – 1st Year**

| BIOL 323 Human Anat & Phys | 4 | SPCM 101 Fund’s of Speech | |
| ENGL 101 Composition I | 3 | or SPCM 215 Public Speaking | |
| HIM 130 Basic Med Term | 2 | or SPCM 222 Argum’n & Debate |  |
| PHYS 111 Intro to Physics I | 4 | | |
| SPCM 101 Fund’s of Speech | | | |
| or SPCM 215 Public Speaking | | | |
| or SPCM 222 Argum’n & Debate | 3 | | |

**Summer Clinical Semester**

| RESP 110 Intro to Resp Care | 6 | RESP 310 Advanced Resp Care | 5 |
| RESP 150 Clinical Experience I | 6 | RESP 350 Clinical Exp III | 5 |

**Fall Clinical Semester – 2nd Year**

| RESP 495 Mgmnt Obs Practicum | 1 | RESP 355 Resp Care in Clin Med | 4 |
| RESP 180 Pathophys Resp Care | 3 | RESP 381 Resp Care Mngmnt | 1 |
| RESP 210 Resp Critical Care | 5 | | |
| RESP 250 Clinical Experience II | 6 | | |
| RESP 395 Observ Practicum | 2 | | |

**Spring Clinical Semester – 2nd Year**

| RESP 341 Pharmacology | 2 | RESP 440 Ethics for Health Prof | 3 |
| RESP 460 Current Issues in RC | 3 | RESP 475 Clinical Experience IV | 5 |

| Total Credits for AS | 74 | Total Credits for BS | 128 |