The Coalition Chronicle

Coalition for Baccalaureate and Graduate Respiratory Therapy Education

October 31, 2023, Volume 13 (10)

Spotlight Article

Georgia State University, Atlanta, Georgia

Byrdine F. Lewis College of Nursing and Health Professions

By Douglas S. Gardenhire, EdD, RRT, RRT-NPS, FAARC

Chair, Department of Respiratory Therapy

Program Overview

In over 100 years, Georgia State University (GSU) has transformed from a tiny school of commerce to a premier urban Carnegie high research university with students from over 160 countries currently attending. GSU is one of four research universities in the University System of Georgia with a student population of

52,000. The Department of Respiratory Therapy (RT) is housed in the Byrdine F. Lewis School of Nursing and Health Professions, otherwise, known as The Lewis College. The Department of RT currently offers a traditional BSRT, direct clinical entry MSRT, traditional MSRT on campus, fully online MSRT program and a PhD in Health Science with a concentration in respiratory therapy/cardiopulmonary.

Founded in 1969, the Department of Respiratory Therapy at Georgia State has developed over the years into a nationally acclaimed professional program. Currently, we have ten salaried faculty members, plus a medical director. Faculty members integrate academic and clinical education in class as well as in our clinical affiliate settings. Our location in downtown Atlanta provides students with the opportunity to perform their clinical practice at some of the leading healthcare institutions in the south including Emory University Hospital, Emory University Midtown, Grady Memorial Hospital, Northside Hospital, Piedmont Hospital and Wellstar Health Systems. Because our faculty members excel at teaching and research, our students receive instruction on the cutting edge of the profession using the latest technology. Graduate students completing thesis work assist faculty members in research and publishing theses.

Mission and Vision

The mission of the Department is to prepare competent respiratory therapists and future leaders, researchers and instructors in the profession of respiratory care. Our vision is that the Department of Respiratory Therapy will be one of the top five nationally regarded university-based programs for respiratory therapy education and research in the United States. The department offers several programs of study. For students seeking an undergraduate degree there is the Bachelor of Science with a major in respiratory therapy. The department also offers a traditional 36-hour Master of Science in Health Sciences with a major in respiratory therapy for students with a BS in respiratory therapy as well as an on online version. The online program offers RTs with a BS degree to earn a MS in RT from anywhere in the world. Both MS programs are focused on advanced RT clinical procedures, education, research and leadership and can be completed in as little as three semesters. For students that have an undergraduate degree other than respiratory therapy we offer a direct entry clinical master's degree program. Recently, we added the PhD in health science with a concentration in respiratory therapy. This program is hybrid in style offering online and in-person coursework part or full-time. Currently, we have 4 part-time students. All graduate programs meet Southern Association of Colleges and Schools Commission on Colleges (SACS-COC) requirements, offering over 18 credit hours in RT education. All graduate students have an option of completing either a thesis or non-thesis

project for their degree, doctoral students must publish a minimum of one manuscript and complete a dissertation.

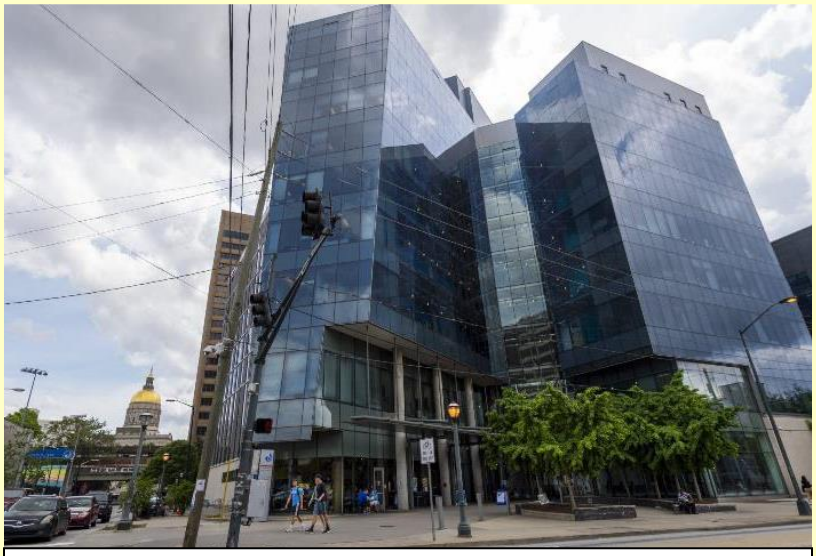
Our graduate students have been successful with faculty mentoring to publish original research conducted in our research laboratories or completed through their thesis work. Additionally, our students have been successful in pursuing a doctoral program to further their education.

RT students in Costanza, Dominican Republic on Study Abroad March 2023

We hire graduate research assistants, graduate teaching assistants (GTA) and graduate lab assistants (GLA) from the traditional MSRT program. Graduate research assistants help faculty members with their research. GTA's and GLA's teach with faculty members in the didactic and laboratory section of courses. Graduate assistants can be hired at half or full tuition waiver. This has helped with undergraduate instruction, skill and knowledge retention, and reduced attrition. For clinical teaching, we hire 7-10 part-time preceptors and most of them are graduates from our program. Currently, we have approximately 200 students in all our programs. Several of our students come from other countries including, China, Ethiopia, Nigeria, India, Jamaica, Saudi Arabia, South Africa, Taiwan, Singapore, Turkey and Vietnam.

Nicaragua Health Summit 2019 host by Comunidad Connect. University Partners come together in country to build a house and share research done in the communities.

The department has established a reputation for research in several areas including aerosol medicine, respiratory therapy product evaluation, education research, respiratory physiology, and lung prediction. In the last two years, the department has received over $500,000 in external funding and over $50,000 in internal funding.



Parker H. Petite Science Center, Housing GSU RT Student and Research Laboratories

PROFESSIONAL CURRICULUM
BACHELOR DEGREE PROGRAM IN RESPIRATORY THERAPY

FIRST PROFESSIONAL YEAR

Fall Semester		**Credit Hours**
RT 3005	Clinical Cardiopulmonary Physiology	3
RT 3111	Respiratory Care Procedures I	4
RT 3025	Patient Evaluation	4
RT 3050	Clinical I	1
CNHP 3010	Advanced Medical Terminology	3
Total Hours	15	

Spring Semester		
RT 3030	Pulmonary Diagnostics	3
RT 3112	Respiratory Care Procedures II	3
RT 3040	Respiratory Care Pharmacology	3
RT 3027	Pulmonary Diseases	3
RT 3051	Clinical II	3
CNHP 3200	IPE Seminar	1
Total Hours	16	

Summer Semester		
RT 4011	Ventilatory Support I	3
RT 4070	Advanced Cardiac Life Support	2
RT 3052	Clinical III	1
RT 4080	Pediatric Respiratory Care	2
Total Hours	8	

PROFESSIONAL CURRICULUM
BACHELOR DEGREE PROGRAM IN RESPIRATORY THERAPY

SECOND PROFESSIONAL YEAR

Fall Semester		**Credit Hours**
RT 4012	Ventilatory Support II	4
RT 4060	Advanced Critical Care Monitoring	2
RT 4081	Neonatal Respiratory Care	2
RT 4051	Clinical IV	4
CNHP 3500	Research Methods	3
Total Hours	15	

Spring Semester		
RT 4075	Patient Care Management Strategies	3
RT 4085	Professional Trends to Long-term Care	3
RT 4052	Clinical V	5
RT 4096	End of Life Issues	1
Total Hours	12	

60 Prerequisites + 66 RT Degree Program
TOTAL CREDIT HOURS FOR BACHELORS DEGREE: 126 Semester Hours

HEALTH SCIENCE CORE CURRICULUM (9)
The following courses are required of all students in the Master's Program

Required Courses (9)
CNHP 6000: Research Methods for the Health and Human Sciences Professions (3)
CNHP 8000: Trends Affecting Health Policies, Practices and Laws (3)
CNHP 8010: Leadership and Ethics in Healthcare (3)

SPECIALIZATION (Respiratory Therapy) Curriculum (21)
The following courses are required of all students in the Master's Program
Required Courses (21)
RT 7010 Teaching Practicum (3)
RT 7030 Advanced Topics in Ventilatory Support (3)
RT 7040 Advanced Practice Monitoring (3)
RT 7060 Critical Care Therapeutics (3)
RT 7090 Research Seminar in Respiratory Care (3)
RT 7095 Special Problems in Respiratory Care (3)
RT 7950 Directed Readings (3)
CNHP 6010 Graduate Medical Terminology (3)

THESIS/NON-THESIS/ADVANCED PRACTICE (6)
Students will take a minimum of 2 semesters at 3 hours each in one of the following options:
Thesis Option: Students will take RT 7999, depending on specialty area. A minimum of two semesters at three hours each must be completed. These courses must be taken consecutively. Students must be enrolled in thesis credit each semester they continue to work on completion of the requirements for thesis research.
Non-thesis Option (Project): Respiratory Therapy students will take six hours of RT 7995, Directed Study. A minimum of two semesters at three hours each must be completed. These courses must be taken consecutively. Students must be enrolled in non-thesis credit each semester they continue to work on completion of the requirements for non-thesis.
Advanced Practice: Respiratory Therapy students will register for six hours of RT 7995 Directed Study. Two-3 hour courses must be completed. These courses do not have to be taken consecutively. Students must be enrolled in RT 7995 each semester as they continue to work on completion of the requirements for advanced practice.

RT 7995 Directed Study (non-thesis project/ advanced option) (3)	(6)
RT 7999 Thesis (3)	(6)

Advanced Practice Credentials:

Neonatal-Perinatal Specialist	Advanced Critical Care Specialist
Certified Pulmonary Function Technologist	Registered Pulmonary Function Technologist
Certified Sleep Disorder Specialist	Registered Sleep Disorder Specialist
Certified Tobacco Treatment Specialist	Certified Asthma Educator

Collage of students completing health assessments in the mountains of the Dominican Republic, March 2023.

PROFESSIONAL CURRICULUM
CLINICAL ENTRY MASTER'S DEGREE PROGRAM IN RESPIRATORY THERAPY

YEAR ONE

Fall Semester:

RT 6111	(4 hrs) Respiratory Care Procedures I
RT 6025	(4 hrs) Patient Evaluation
RT 6050	(1 hr) Clinical I
RT 6005	(3 hrs) Clinical Cardiopulmonary Physiology
CNHP 6010	(3 hrs) Graduate Medical Terminology
CNHP 8000	(3 hrs) Trends Affecting Health Policy
	Total Hours: 18

Spring Semester:

RT 6027	(3 hrs) Pulmonary Diseases
RT 6030	(3 hrs) Pulmonary Function Diagnostics
RT 6040	(3 hrs) Respiratory Care Pharmacology
RT 6051	(3 hrs) Clinical II
RT 6112	(3 hrs) Respiratory Therapy Equipment II
CNHP 6000	(3 hrs) Methods of Research for Health Professions
CNHP 6200	(3 hrs) IPE Seminar
	Total Hours: 20

Summer Semester:

RT 6052	(1 hr) Clinical Practice III
RT 7011	(3 hrs) Ventilatory Support I
RT 7070	(2 hrs) Advanced Cardiac Life Support
RT 7080	(2 hrs) Pediatric Respiratory Care
RT 7090	(3 hrs) Research Seminar in Respiratory Care
CNHP 8010	(3 hrs) Leadership and Ethics in Healthcare (Online)
	Total Hours: 14

YEAR TWO

Fall Semester:

RT 7012	(4 hrs) Ventilatory Support II
RT 7051	(4 hrs) Clinical IV
RT 7081	(2 hrs) Neonatal Respiratory Care
RT 7040	(3 hrs) Advanced Practice Monitoring
RT 7950	(3 hrs) Directed Reading
RT 7995	(3 hrs) Directed Studies **or**
RT 7999	(3 hrs) Thesis
	Total Hour: 19

Spring Semester:

RT 7052	(5 hrs) Clinical V
RT 7075	(3 hrs) Patient Care Management Strategies
RT 7085	(3 hrs) Trends to Long-Term Care
RT 7030	(3 hrs) Advanced Topics in Mechanical Ventilation
RT 7995	(3 hrs) Directed Studies **or**
RT 7999	(3 hrs) Thesis
RT 7096	(1 hr) End of Life Issues
RT 7095	(3 hrs) Special Problems
	Total Hours: 21

Total Program Hours: 92

PhD Health Science-Cardiopulmonary Care/Respiratory Therapy

Health Sciences Core Courses: (5 required health science courses; 12 hours)		
Course Title	**Credits**	
Grant Writing	3	
Health Sciences Seminar (1 hour per semester)	3	
Leadership and Ethics in Healthcare	3	
Teaching in the Health Professions I	1	
Teaching in the Health Professions II	2	
Trends in Health Policies	3	
Healthcare Law and Ethics for the Healthcare Professional	3	
Total Hours	**12**	

Research/Statistics Core Courses (3 required and 1 elective from the 5 listed courses; 12 hours)			
Course #	**Course Title**	**Credits**	**New or Existing**
Required			
CNHP 8030	Research Method and Design in Health Professions	3	
CNHP 8040	Biostatistics I	3	
CNHP 8045	Biostatistics II	3	
Electives			
CNHP 8500 PHPH 8885	Meta-Analysis I	3	
NURS 8012	Qualitative Methods and Analysis	3	
PHPH 8830	Advanced Statistical Topics	3	
PHPH 8885	Fundamentals of Clinical Trials	3	
PHPH 7711	Epidemiology Method I	3	
	Total Hours	**12**	

Health Sciences Research and Dissertation: (3 required courses; 24-45 hours)			
Course #	**Course Title**	**Credits**	
CNHP 9000	Directed Research in Health Sciences (3 h/semester before passing the preliminary examination, minimum 12 credits)	12-24	
CNHP 9005	Doctoral Preliminary Examination	3*	
CNHP 9006	Doctoral Dissertation (3 h/semester after passing the preliminary examination, minimum 12 credits)	12-18	
	Total Hours	**24-45**	

Concentration Specific Required Core Courses: (4 required from the 6 listed courses; 12 hours)		
Course Title	**Credits**	
Critical Care Therapeutics	3	
Advanced Ventilation	3	
Advanced Monitoring	3	
Research Seminar	3	
Special Problems in Respiratory Care	3	
Directed Readings in RT	3	
Total Hours	**12**	

Faculty Members

Corinne Battey-Muse (Maxie), MS, RRT, RRT-NPS, AE-C is a clinical instructor in the Department of Respiratory Therapy at Georgia State University where she teaches Respiratory Care Procedures I & II and Neonatal Respiratory Care. She received both her undergraduate and master's degree from GSU RT and is currently pursuing a PhD in workforce education at the University of Georgia. Prior to moving to the educational sector, she worked at bedside for over 7 years in both the neonatal and adult critical care units, as well as neonatal transport. Current research projects include working with the AARC Clinical Practice Guidelines committee on upcoming releases of updated guidelines. She also serves on the CoBGRTE Scholarship Committee. years.

Malika Charles, MS, RRT, RRT-NPS, AE-C is a clinical instructor in the Department of Respiratory Therapy at Georgia State University where she teaches patient assessment and oversees six clinical students at Kennestone Regional Medical Center every Tuesday and Thursday. She received her master's degree from GSU RT. She completed her initial respiratory therapy training with the Air Force. Prior to teaching, she worked for GSU RT as a graduate assistant and part-time instructor. She has worked at the bedside for over 13 years in both the neonatal and adult critical care units.

Douglas S. Gardenhire, EdD, RRT, RRT-NPS, FAARC is clinical professor and Chair of the Department of Respiratory Therapy. He serves as the College Liaison for International Initiatives and Chair of the International Committee. He received his doctorate from the University of Georgia. Dr. Gardenhire has authored numerous abstracts, original research and review articles on respiratory care education, international education, pharmacology, and aerosol medication. During his time at Georgia State University, he has garnered over $1.1 million in external funds for the Department of Respiratory Therapy and Georgia State University. He is the author of *Rau's Respiratory Care Pharmacology*, chapter author on Airway Pharmacology for Egan's Fundamentals of Respiratory Care, as well as chapter

author on Airway Pharmacology and Delivery of Aerosol Drug Therapy in Respiratory Care Clinical Lab Competency Manual. Dr. Gardenhire has been involved in many educational projects and conferences prepared by American Association for Respiratory Care (AARC), Georgia Society for Respiratory Care, and American Thoracic Society. In 2017 he started the first Study Abroad program in Latin American for respiratory therapy students to understand the differences and needs in healthcare abroad. He received the Educator of the Year award and was inducted as a fellow in 2012 by the AARC and is a Georgia Governor's Teaching Fellow. In 2020 he was honored by Lambda Beta as a National Honorary Member to recognize is work in respiratory care. In 2022 he was awarded the Jimmy A Young Medal by the AARC for his meritorious and lifetime contribution to respiratory care. His research interests continue to focus on respiratory care education and trends, pharmacology, product evaluation, and international education.

Lynda Thomas Goodfellow, EdD, RRT, AE-C, FAARC is a professor of respiratory therapy and Director of Clinical Practice Guidelines Development for the American Association for Respiratory Care (AARC). Dr. Goodfellow received her doctorate in Adult Education from the University of Georgia and her baccalaureate in respiratory therapy from the Medical College of Georgia. She has served on the National Asthma Educator Certification Board, the Board of Directors for the American Association for Respiratory Care (AARC) in many different capacities, and the American Respiratory Care Foundation (ARCF). She serves as section editor for RESPIRATORY CARE, the science journal for the respiratory care profession. Areas of interest include research methodology, chronic respiratory disease management as it relates to asthma, tuberculosis, tobacco education, and education of respiratory care professionals. Dr. Goodfellow has received intramural awards, a clinical investigator award from the American Lung Association for support on asthma research for adolescent children with asthma in the inner city and has been funded through the NIH as a member of the National Tuberculosis Curriculum Consortium. Her publications include articles in the Journal of Allied Health, RESPIRATORY CARE, Journal of American Nursing, North American Clinics, and Respiratory Care Education Annual.

Brent Murray MS, RRT is the Director of Undergraduate/Professional Admissions and clinical assistant professor. He currently ABD in Workforce Education at the University of Georgia. He has taught at GSU for 12 years and has been a respiratory therapist for 24 years. He has presented abstracts with the American Thoracic Society, American Association of Respiratory Care, and Association of Schools Advancing Health Professions. His focus as a practitioner was adult critical care and leadership. He spends his class time instructing undergraduate and graduate students focusing on mechanical ventilation and ventilation strategies, leadership, and interpretation of radiography.

Robert Pettignano MD, FAAP, FCCM, MBA is the Medical Director of the Department of Respiratory Therapy. He graduated from medical school at Ross University, Dominica, West Indies. He completed his pediatric residency at Newark Beth Israel in New Jersey, his pediatric critical care fellowship at Egleston Children's Hospital at Emory University in Atlanta and an MBA at Kennesaw State University. Dr. Pettignano has practiced in both the private and academic sector. During his time at Egleston Children's Hospital he was the Director of the Pediatric and Adult section of the Extracorporeal Membrane Oxygenation Program and Medical Director of the pediatric intensive care unit (PICU). He was elected to the American College of Critical Care in 2000. Dr. Pettignano has been recognized by pediatric residents from Emory University and Orlando Regional Healthcare as Teacher of the Year. His research is now focused on the impact of Medical-Legal Partnership (MLP) on disparities and access to care as well and the interdisciplinary education that is an integral part of the success of MLP. From 2006 he has been the Medical Champion/Director of The Health Law Partnership (HeLP). He is on the local HeLP Advisory Board as well as on the Advisory Council of the National Center for Medical Legal Partnerships located at George Washington University, School of Public Health, Washington, and D.C.

Shi Huh Samuel Shan, MS, RRT-NPS, RRT-ACCS is a clinical assistant professor. Professor Shan was a practitioner for 5 years with experience caring for neonatal, pediatric, and adult patient populations. His focus in practice was directed towards critical care, with a concentration in mechanical ventilation. His educational focus is helping students bridge the connection from textbook concepts to clinical practices. Professor Shan is currently ABD in Workforce Education at the University of Georgia. His educational philosophy is to educate, motivate, and train students to excel as bedside clinicians in a scholarly, professional and compassionate manner.

Kyle Brandenberger, PhD is an assistant professor in the Department of Respiratory Therapy. He graduated from the United States Military Academy with a B.S. in Chinese Language and a minor in environmental engineering. He served in the U.S. military as an infantry officer at Fort Benning, GA from 2004-2009. Upon completing his term of service, Dr. Brandenberger earned a M.S. in exercise physiology from Georgia State University with a master's thesis on the effects of melatonin during endurance exercise. In 2017 Dr. Brandenberger earned a PhD in kinesiology with an emphasis on neuromuscular physiology. His dissertation work focused on the role of the central nervous system in nonlocal strength losses following exercise induced muscle injury. His previous research includes work on developing assessments for skeletal muscle function following mechanical ventilation. In 2022, Dr. Brandenberger was awarded $50,000 to develop a holistic screening and tracking tool to assess the risks for musculoskeletal injury.

Ralph D. "Chip" Zimmerman, PhD, RRT, RRT-NPS, FAARC is a clinical professor in the Department of Respiratory Therapy and has been teaching at Georgia State for more than 17 years, He also holds appointments in the Honors College and is the Coordinator of Interprofessional Education in the Lewis College. Dr. Zimmerman was a recipient of the 2018 Georgia Governor's Teaching Fellowship, the 2016 inaugural Lewis College Educational Excellence Award, and has been a member of the Lewis

College Teacher-Scholar Academy. He received the Educator of the Year award in 2022 and was inducted as a fellow in 2021 by the AARC. Prior to joining academia, Dr. Zimmerman served as a staff therapist in the PICU at Children's Healthcare of Atlanta-Egleston and as a member of the Children's Response transport team. His research interests include end-of-life care, interprofessional education, and barbecue.

Mohammed M. Alqahtani, PhD, RRT is a post-doctoral fellow. Dr. Alqahtani completed is undergraduate degree in RT from King Saudi bin Abdul-Aziz University for Health Sciences-Riyadh, Saudi Arabia. In 2017 he completed GSU RT Clinical Entry MS degree. He then spent five years completing his PhD in Rehab Science at the University of Alabama-Birmingham where he focused on tobacco research. Currently he is assisting the RT department with a grant from the American Cancer Society, Population Studies focusing on tobacco and behavior.

Contact Information

Tel: 404-413-1270 Email: dgardenhire@gsu.edu URL: http://respiratorytherapy.gsu.edu/academics/

INTERVIEW

Brandon Burk, MS, RRT-ACCS

Program Director-Respiratory Therapy
Ozarks Technical Community College
Springfield, Missouri

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?

I came into the profession of respiratory therapy a bit by accident. My grandfather underwent a heart procedure and had some complications which required that he remain intubated. I noticed that someone recurrently entered the room to check the mechanical ventilator and I asked what their role was. He told me that he was a respiratory therapist. I did some research on the profession and found out that my local community college had a good program and I immediately started working toward a respiratory therapy degree. A fortuitous event which prompted the best professional decision of my life.

2. Who were your mentors?

-What/how did they contribute to your career?

I have had four individuals that were very influential in my development, both in my career as a professional, and as a man. The first two were my instructors at Ozarks Technical Community College in the respiratory therapy program; Doug Pursley and Aaron Light. These two men not only taught me the foundation of respiratory care, but they ignited a fire inside me for the profession. They also offered me my first official job in education as a lab instructor in the program that I had attended. I am now the program director of that same program. I owe a great deal to Doug and Aaron for seeing something in me that I didn't know I was capable of becoming. The other two mentors that had and continue to have a profound impact on me are Brent Kenney and Bill Haire. Both Brent and Bill were in leadership roles in my first clinical job at Mercy Hospital in Springfield,

Missouri following graduation. They impacted me greatly by improving my bedside clinical skills and taught me how to be a better communicator and leader. Without the outstanding leadership of all four of these men, I would not be in the position I am today.

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?

Furthering my education allowed me to be eligible for positions of leadership that I otherwise would not have met the required minimum qualifications. More than that, are the skills and lessons that I learned throughout the process. After community college, I completed a BSRT from Missouri State University and a MS in Respiratory Care Leadership from Northeastern University. These advanced degrees helped mold me into the clinician, educator, and leader that I am today. Contacts through attending the programs also opened many doors for me professionally. In addition to my normal job as program director, I work as a consultant, providing clinical expertise, education, research, and regulatory advice. I am also heavily involved in the AARC and the Missouri Society for Respiratory Care (MSRC). I currently serve as the senior Missouri delegate in the AARC House of Delegates, where I am the co-chair of the resolutions committee. I also serve as the co-chair of the legislative committee for the MSRC. It is of upmost importance to give back to the profession as an advocate and volunteer to ensure respiratory care has a bright future and respect within the medical community.

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

It became clear to me that hard work and dedication to this profession will pay off. Respect and recognition is earned, not given. The respiratory care profession has had a problem with professional identity over time. We know there is a shortage of respiratory therapists and many in the community are not aware that the profession exists. We all have a responsibility to be advocates for the profession, which will help fill the seats in respiratory care programs, get us more help at the bedside and allow us to focus on giving the outstanding patient care that we are known for. My parents always taught me that you get out what you put in. I didn't want to admit it at the time, but they were right. This is why I try to give back to the profession that has given me so much.

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

This profession is not simply a job, it is a calling. Respiratory therapists can have a profound impact on innumerable lives. Get involved in your professional organization. Advance your education. Advocate for your patients, your profession and yourself. Do not settle for anything less than excellence. Always strive to be the best version of yourself.

Professional Positions Posted

***STIMIT-Dräger, *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**

ASRT to BSRT & MSRC Degree Advancement Programs

BSRT and MSRT Entry Programs

Graduate Respiratory Therapist Programs

www.CoBGRTE.org

CoBGRTE Director Election

Active CoBGRTE members will hold an election in November to fill a position on the board of directors (5-year term, 2024-2028). The election has two candidates who are profiled below. Election link will be sent by November 1 and ballot must be submitted by November 30 to be counted.

Michele Pedicone, DHS, RRT, RRT-NPS, PNAP, FAARC

Dr. Pedicone began her respiratory therapy career in Seattle, Washington as a neonatal/pediatric specialist in 2007, having earned her respiratory therapy degree from Highline College in Des Moines, WA. In 2014, she began teaching at Seattle Central College and has since taught respiratory therapy for universities in TN, NY, and NC. She currently resides in NC and holds the position of Clinical Associate Professor at the University of North Carolina, Wilmington, in addition to her teaching duties, she has served as a transport therapist and keeps her respiratory therapy skills active at the bedside. Dr. Pedicone has earned a master's in respiratory care leadership from Northeastern University (Boston, MA) and a Doctor of Health Science with a concentration in Global Health from NOVA Southeastern University (Fort Lauderdale, FL). Dr. Pedicone is a board member of the NC State Respiratory Care Society, the AARC Government Affairs Committee, and chairs the CoBGRTE Exhibit Committee.

1. How can CoBGRTE assist in the further development of the profession of respiratory care?

The 2015 and Beyond Conferences identified future competencies needed by respiratory therapists to provide safe, effective, evidence-based medicine in a changing healthcare system. Furthermore, these conferences identified the education necessary to meet these potential new roles and responsibilities. Now that the need has been identified, the challenge is upon all respiratory therapists to acknowledge and embrace how this will impact their careers. The profession of respiratory care is on the cusp of growth in which the needs are identified; the workforce must prepare for that momentous forward shift. In this progression, CoBGRTE plays a significant role. Respiratory care education will need to shift to meet the needs of a healthcare system which demands an evolving scope of practice. CoBGRTE can support programs in developing curriculums to meet these needs. By identifying and supporting programs that desire to increase educational offerings, CoBGRTE has the potential to impact the profession on a

high level. Providing opportunities for networking aligns programs with valuable resources.

2. How can CoBGRTE support the expansion of baccalaureate and graduate respiratory care education?

In the survey of respiratory therapy education program directors in the United States, Barnes, Kacmarek, and Durbin identified that there are significant differences between baccalaureate degree and associate degree programs. To be successful, respiratory care programs will need more resources; space, clinical education opportunities, instructors, the list is exhaustive. The respiratory care instructor pool is limited. Many programs are unable to expand their competencies due to inadequate staffing. Instructors are not available or do not have the necessary credentials. This shows an absolute need for more RT's with advanced degrees. CoBGRTE should support this expansion by offering more scholarships, especially for faculty who are pursuing higher education to align with the 2015 and beyond conference results.

CoBGRTE provides a repository of baccalaureate and graduate respiratory care programs. This is extremely valuable for therapists who desire to increase their education to fulfill the need for increased faculty for expanding programs. This list is being constantly updated.

3. How can CoBGRTE better represent its membership?

CoBGRTE does a great job representing its members. By continuing to provide information on existing programs as well as supporting the development of new programs through information sharing and networking, members have the tools to research appropriate programs. CoBGRTE members are rich in knowledge, in not only respiratory care education but also management, leadership and research. An increased mentoring and networking pool would support new members as well as those who encounter obstacles in their career paths. Offering a way for members to volunteer by listing specific needs of the organization would allow members to become involved. This could ensure a greater sense of responsibility not only to the organization as a stakeholder, but also to the profession of respiratory care.

4. What additional programs, services, or activities should CoBGRTE seek to provide for its members?

Support and scholarships. One of the greatest resources that CoBGRTE offers to its members is networking. The Summer Seminar features highly respected leaders in respiratory education who share relevant evidence-based knowledge in seminar, lecture and discussion format. The round table discussions provide rich dialogue on current respiratory care education issues as well as identifying future needs and potential obstacles for the profession. A great networking tool.

5. How can CoBGRTE assist in the faculty development of its members?

CoBGRTE can align with and support members by providing a rich repository of resources to include increased scholarships, mentorship, and educational opportunities. Mentorship is one of our greatest gifts. An organized feature within CoBGRTE that matches mentors and mentees could provide opportunity to share knowledge, wisdom, support and encouragement to one another.

Christine Sperle PhD, RRT, AE-C, Associate Professor, Program Director at CHI St. Alexius/University of Mary Respiratory Therapy Program

I received my undergraduate Bachelor of Science degree in Respiratory Therapy from the University of Mary and began working as a staff therapist at St. Alexius Medical Center in Bismarck, ND specializing in Adult and Neonatal intensive care, in addition to serving on the protocol team and as a clinical preceptor. During that time, I also worked in a long-term acute care facility gaining experience with trach patients and working on an interdisciplinary team of respiratory therapists, speech therapists, pharmacists, and physical therapists. In 2002 I dove headfirst into the world of education starting my first position as an educator as the Director of Clinical Education for the St. Alexius/University of Mary Respiratory Therapy Program. During that time, I completed a master's degree in education from the University of Mary and a PhD in Higher Education from the University of North Dakota. In 2015 I stepped into my current role as Program Director and Chair of the CHI St. Alexius /University of Mary Respiratory Therapy Program. I oversee the two Entry to the Profession programs (Bachelor of Science and Master of Science in Respiratory Therapy) in addition to the Degree Advancement Program (RRT-BSRT).

I have held several positions for the ND Society for Respiratory Care over the past 15 years and am currently serving my second term as Delegate where I serve as Co-Chair of the Orientation Committee. I am a member of the Editorial Board for the Respiratory Care Education Annual and serve on the Interprofessional Education (IPE) committee at the University of Mary. My colleagues and I are currently developing and interprofessional education experience for Respiratory Therapy and Physical Therapy students with simulations and plan to pilot a study to survey student perceptions of IPE pre and post experience as well as variables that may influence responses other than the experience itself.

1. **How can CoBGRTE assist in the further development of the profession of respiratory care?**

The mission and values of CoBGRTE focus on the advancement of education, advocacy, collaboration, and dedication to the profession. While there is great value in this endeavor, it is important to review and reflect on how well we are living up to our purpose. We have done a great job advocating for our profession by collaborating with the AARC, NBRC and CoARC, however, with the current shortage of RTs, no wage difference between associate, baccalaureate and masters' graduates, and decreased enrollment in many programs, we need to not only come up with ideas on how to overcome these challenges but put those ideas into action. We are a passionate group of leaders with many talents, we need to find a way to increase our presence online and to share our ideas with those we are advocating for. Some changes we could work on would include finding additional ways to share our ideas above and beyond the monthly chronicle. Our website could use some updating to include new tools and resources other than what is available on the AARC website. Another option would be to have more in-person meetings where anyone could attend, potentially at the summer forum where educators and managers are already gathered. We do typically have a booth at Congress, however having a booth at the Summer Forum may be a great way to collaborate with associate degree faculty as well as managers and possibly acquire new members.

2. **How can CoBGRTE support the expansion of baccalaureate and graduate respiratory care education?**

One of the main challenges with expansion of baccalaureate and graduate respiratory care education is recognition of the benefits of an advanced education, especially to those who are hiring our graduates. We have research supporting the baccalaureate degree due to the length of the education needed to provide graduates with the competencies required to practice. However, we do not have any research to support the need for advancing to the baccalaureate degree that will convince department leaders, associate degree faculty and associate degree therapists that advanced education is needed. We need more research looking at the differences in baccalaureate and associated prepared graduates at the bedside. However, to do so, will need to collaborate with department leaders to assist with collecting data to determine if there truly is a difference. This would include deciding what data to collect, how to collect it and how to develop and conduct such a study. There are several graduate programs that may be able to assist with research, and it would be a great way for students to get published.

3. **How can CoBGRTE better represent its membership?**

As mentioned earlier, providing opportunities to share tools and resources other than those that can be found on the AARC website would be a great start. Multifaceted ways for communication and collaboration, such as updating the website and our online presence, would be helpful. More ways to involve students in the organization would also be helpful. Students want to be part of and feel like they have a voice – inviting them to meetings would be beneficial for both educators and students. Students are very innovative and can assist with social media and ideas to increase awareness of our profession as well as our organization.

4. **What additional programs, services, or activities should CoBGRTE seek to provide for its members?**

Working with the AARC to advertise our programs for free or at a more affordable cost may be beneficial. It is good to have a roster of programs, however it would be beneficial to have more information about these programs as well as assistance with recruitment and marketing. There are plenty of programs, we need to work on filling the seats.

5. **How can CoBGRTE assist in faculty development of its members?**

A mentorship program for new faculty and new key faculty would be helpful. Also a way to share knowledge and answer questions in real time like a connect page or a hotline could be a great way to assist new faculty/key faculty as questions come up at the spur of the moment that need quick answers. Having a means to ask and learn from other leaders, not just mentors may be useful. As our scope of practice continues to expand, we could provide resources to faculty to assist them with teaching the new content. We could also provide teaching strategies for difficult concepts. Again another place to house these resources with easy access would be valuable for new and seasoned educators.

SAVE THE DATE

CoBGRTE
ROUND TABLE DINNER

TUESDAY, NOVEMBER 7TH

7:00-9:00 PM

BAVARIAN BIERHAUS

NASHVILLE'S ONLY AUTHENTIC GERMAN BIERHALL

121 Opry Mills Drive Nashville

1 mile from the Opry Hotel by car (19 min walk, 4 min by car)

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

Space is limited RSVP early

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
Midwestern State University
Radford University
Youngstown State University
Nova Southeastern University
University of Arkansas for Medical Sciences
State University of New York at Stony Brook
University of Texas Health Science Center – San Antonio
University of Hartford
University of Kansas Medical Center
College of Southern Nevada
University of Akron
CHI St. Alexius Health-University of Mary
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
Southern Connecticut State University

CoBGRTE Institutional Members - Continued

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
California Society for Respiratory Care
Southern Illinois University Carbondale
University of Missouri
Massachusetts College of Pharmacy and Health Sciences
Rowan University
Children's Hospital Colorado
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
University of West Alabama

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

CoBGRTE™

Coalition for Baccalaureate and Graduate Respiratory Therapy Education

"Dedicated to Improving Respiratory Therapy Education"

www.cobgrte.org