

# **The Coalition Chronicle**

**Coalition for Baccalaureate and Graduate Respiratory Therapy Education**

---

**September 30, 2023, Volume 13 (9)**

---

## ***Spotlight Article***

### **Rowan University**



**Virtua Health College of Medicine and Life Sciences**

**Rita & Larry Salva School of  
Nursing & Health Professions**

**Respiratory Therapy Programs  
Entry into Professional Practice**

**Degree Advancement  
Bachelor of Science**

**By Barry Ransom, MS, RRT, RRT-NPS, RRT-ACCS  
Professor of Professional Practice and Founding Director**

## University and School Overview

Rowan University, originally known as Glassboro Normal School, was founded in 1923 for the purpose of educating teachers and with 236 students. Rowan University has evolved over the last 100 years to become a Carnegie-classified, comprehensive research university, dedicated to excellence in undergraduate education, with over 22,000 students from 41 US states and 40 countries. Rowan now has more than 80 bachelor's and 60 master's degree programs; it has 12 doctoral programs and two professional programs housed in 17 colleges and schools.

Ranked in 2023 by U.S. News & World Report as 88th among national public universities. Rowan is advancing in categories for best value, best colleges for Veterans, and social mobility, moving to 91 among national universities. Now on



Professor Swietlik teaching Fundamentals of Respiratory Care Lab

a total of 8 campuses in Southern New Jersey, Rowan is one of only four universities in the nation to grant both M.D. and D.O. medical degrees.

The Rita & Larry Salva School of Nursing & Health Professions evolved from similarly humble beginnings, forming in 2015 in association with the College of Science & Mathematics, becoming an autonomous school in 2021, as one of three schools in the new Virtua Health College of Medicine and Life Sciences of Rowan University. Renamed the Rita & Larry Salva School of Nursing & Health Professions in September 2023, the school houses the departments of Allied

Health, Health & Exercise Science, and Nursing. The Respiratory Therapy program is housed in the department of Allied Health.

## **Respiratory Therapy Program**

Respiratory therapy at Rowan welcomed its first cohorts in fall 2023. The program offers two Bachelor of Science in Respiratory Therapy degree programs; an Entry into Professional Practice program and a Degree Advancement program. Both programs received provisional accreditation in 2023 and are the first and only baccalaureate level respiratory therapy programs in the State of New Jersey.

In 2017, Respiratory Therapy programs in the southern New Jersey area permanently closed. At the time, this closure reduced the number of RT programs in the state to three. This exacerbated an already growing shortage of respiratory therapists and decreased the number of new RTs entering the field. As early as 2018, Frank Bender, the RT department director at Inspira Health Medical Center began to inquire about the creation of a new program at Rowan College of South Jersey. Those initial inquiries lead to an exploration by Rowan University into the feasibility of, and the community need for, a baccalaureate entry into professional practice respiratory therapy program. Determining that there was in fact a dire need for new respiratory therapists, Rowan University's Vice President of Academic Affairs, Dr. Roberta Harvey, led efforts to develop both an entry into professional practice and a degree advancement respiratory therapy program.



Rowan BSRT students learning to safely transport H-tank O2 cylinders.

In the spring of 2023, both the entry into professional practice (BSRT-EIP) and the degree advancement (BSRT-DA) BS in Respiratory Therapy programs received provisional accreditation from the CoARC and the key personnel moved into a brand-new state of the art facility on the Rowan College of South Jersey campus in Sewell, NJ. In the fall of this year, with all key personnel and faculty in place, the programs opened their doors and the inaugural cohorts for both programs began taking classes. In 2025, the BSRT-EIP program will produce New Jersey's first BSRT graduates.

Housed in the new Inspira Health Sciences Center, the BSRT-EIP program combines state of the art respiratory care equipment and educational technology with a rich, current, rigorous and relevant curriculum designed to prepare high quality graduate respiratory therapists with the knowledge and skills required for success in modern respiratory care. In addition to the foundational and advanced respiratory care courses, topics including an introduction to clinical research, evidence-based practice, teamwork and collaboration, and leadership further prepare graduates for future roles in leadership and education.

Based in the same location as the entry into practice program, the BSRT-DA program is offered fully online allowing students to complete their BSRT degree from anywhere and at their own pace. The curriculum for this 30-credit degree



Rowan BSRT students practicing Vital Signs

completion program was developed to meet the needs of both the active working RRT as well as the newly graduated recently credentialed respiratory care practitioner and is designed to enhance the knowledge and skills of respiratory therapists and to prepare them for advancement into leadership and other roles throughout the spectrum of respiratory and health care. The

DA program curriculum covers and introduces students to a variety of topics designed to improve knowledge and skills in both the clinical and leadership aspects of respiratory care.

The establishment and continued development of articulation agreements and corporate partnerships helps to keep the curriculum clinically and professionally relevant while also keeping tuition affordable.

## **Admission Requirements**

Admission to the Entry into Practice Bachelor of Science in Respiratory Therapy (BSRT) program is competitive. The program accepts a maximum of 30 students each fall. The admission requirements listed below are a requirement for but not a guarantee of admission.

- Pre-professional associate degree or equivalent college coursework that fulfills foundational, technical, and general education requirements
- Minimum 2.5 overall GPA



- Minimum 2.8 GPA in required science courses
- Minimum composite score of 72 on the Health Sciences Reasoning Test (HSRT)
- Completion of criminal background check (required for participation in clinical placements)
- Compliance with immunization requirements (required for all academic and clinical activities)
- Current certification in Basic Life Support/CPR
- Compliance with technical standards for mobility, physical endurance, motor skills (fine & gross), tactile, visual, hearing and mental/attitudinal capacities



Admission to the Degree Advancement Bachelor of Science in Respiratory Therapy (BSRT) program is different, since applicants to the program will already have active RRT credentials. There is no numerical limit to the number of accepted applicants:

- Associate degree in respiratory care from a CoARC accredited program
- Active registered respiratory therapy (RRT) credential

- Prerequisite statistics course (equivalent of Rowan's Elementary Statistics or Statistics I)

Determination of credits/credit equivalency for a total minimum of 90 credits is conducted by the RT admissions team.

## **Coursework**

Coursework for the **Entry into Practice BSRT** program reflects its structure as a “2+2” program (2 years/AS degree from community college, 2 years intensive RT didactic, lab and clinical coursework at Rowan):

### **Prerequisite Foundational Coursework:**

<b>Course Number*</b>	<b>Course Name</b>
MATH 01123	College Algebra
PSY 01107	Essentials of Psychology
HES 00202	Medical Terminology
PHIL 09341	Biomedical Ethics

\* Additional course in patient care required (e.g. ALH 104 *Patient Care* at Rowan College of South Jersey).

### **Prerequisite Foundational Coursework:**

<b>Course #</b>	<b>Course Name</b>
STAT 02100 -OR- STAT 02260	Elementary Statistics -OR- Statistics I
BIOL 10210	Anatomy and Physiology I
BIOL 10212	Anatomy and Physiology II
BIOL11330	Microbiology
CHEM 0611	Chemistry

## General Education Requirements

The Rowan Core (general education) requirements are waived for transfer students with an earned AA or AS degree from a NJ community/county college.

## Major Coursework

<b>AAS Degree or Equivalent</b>	<b>60 Credits</b>
<b>Course</b>	<b>Credits</b>
<b>Junior Year Fall Semester</b>	
RESP 09300 Fundamentals of Respiratory Care Lecture	3
RESP 09301 Fundamentals of Respiratory Care Lab	2
RESP 09302 Cardiopulmonary Anatomy and Physiology	3
RESP 09303 Respiratory Care Pharmacology	2
RESP 09304 Critical Care	3
RESP 09305 Clinical Practice I	2
<b>Semester Credit Total</b>	<b>15</b>
<b>Junior Year Spring Semester</b>	
RESP 09310 Principles of Ventilatory Support I Lecture	3
RESP 09311 Principles of Ventilatory Support I Lab	2
RESP 09306 Cardiopulmonary Evaluation	3
RESP 09307 Cardiopulmonary Pathophysiology	3
RESP 09315 Clinical Practice II	2
<b>Semester Credit Total</b>	<b>13</b>
<b>Senior Year Fall Semester</b>	
RESP 09410 Principles of Ventilatory Support II Lecture	3

RESP 09411 Principles of Ventilatory Support II Lab	2
RESP 09402 Pediatric and Neonatal Respiratory Care Lecture	3
RESP 09403 Pediatric and Neonatal Respiratory Care Lab	1
RESP 09400 Introduction to Clinical Research	3
RESP 09425 Clinical Practice III	3
<b>Semester Credit Total</b>	<b>15</b>
<b>Senior Year Spring Semester</b>	
RESP 09404 Respiratory Care in Long Term, Home, & Pulmonary Rehab Setting	3
RESP 09401 Evidence-Based Practice	3
HCNV 07401 Interprofessional Teamwork in Healthcare	2
HCM 51101 Introduction to Healthcare Management	3
RESP 09435 Clinical Practice IV	3
RESP 09450 Senior Seminar	3
<b>Semester Credit Total</b>	<b>17</b>
<b>Program Credit Total</b>	<b>120</b>

Coursework for the *Degree Advancement BSRT* program reflects its structure as a "3+1" program, with 90 credits applied to an associate degree in respiratory care from a CoARC accredited program and credit equivalencies determined by the RT admissions team:

<b>Course</b>	<b>Credits</b>
WA 01330 Introduction to Technical Writing	3
RESP 09460 Advanced Concepts in Respiratory and Critical Care	3
RESP 09400 Introduction to Clinical Research	3
RESP 09401 Evidence-Based Practice	3

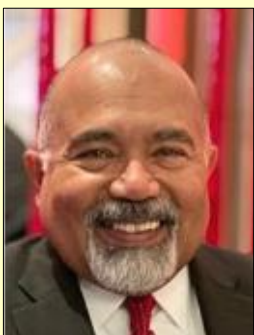


RESP 09461 Introduction to Disease Management	3
RESP 09462 Ethics and End of Life Issues	3
HCM 51301 Healthcare Delivery and Quality	3
RESP 09463 Polysomnography and Topics in Sleep Medicine	3
RESP 09464 Leadership in Respiratory Care	3
RESP 09465 Capstone	3
DA Program Credit Total	30
BSRT Equivalent Credit Total	120

Students in the program are currently experiencing didactic classes and the lab course that will prepare them for their first clinical experience.

## Faculty

Faculty in the Respiratory Therapy program are highly qualified educators with considerable clinical experience in the field. They ensure the program is of high quality, accessible, and inclusive for all students. They constantly work to keep the program at cutting-edge level, and regularly review and update the program according to evidence-based best practices.



**Barry Ransom, MS, RRT, RRT-NPS, RRT-ACCS is the founding program director.** He has been a respiratory therapist for over 25 years, working primarily in adult and trauma critical care. He also has over 20 years of experience in respiratory and health sciences education and was the director of clinical education for the UMDNJ/Rutgers Respiratory Therapy program from 2013-2017. Professor Ransom earned his AAS in Respiratory Therapy from Atlantic Cape Community College/UMDNJ in 1996, BS in Allied

Health from Widener University in 2010, and MS in Respiratory Care Leadership from Northeastern University in 2015. He is currently the president-elect for the New Jersey Society for Respiratory Care, an affiliate of the American Association for Respiratory Care.



**Paul Swietlik, MA, RRT, RRT-NPS is director of clinical education.** He has been a respiratory therapist for over 39 years, primarily in adult/neonatal critical care, including eight years of experience as a director in two major medical centers. Professor Swietlik worked as a clinical educator and sales executive for a major ventilator manufacturer for 12 years. He served as program director and director of clinical education at Delaware County Community College/Crozer Chester Medical Center, a consortium program in Pennsylvania. Professor Swietlik earned an AAS in Respiratory Therapy from Community College of Philadelphia in 1981, a BS in Business Science in 1994, and an MA in Education from Villanova University in 2002.



**Mitchell O'Shea, MA, RRT, RRT-ACCS, RRT-NPS, CPFT is the director of Degree Advancement Program and Partnership Relations.** He has been a respiratory therapist for 26 years, working in adult, pediatric and neonatal population areas with specialized focus in trauma, surgical, neurologic, cardiovascular critical care and in pulmonary diagnostics. With 16+ years of teaching experience, he was director and clinical education director for Union County College Respiratory Care Program from 2020-23. Professor O'Shea was an adjunct professor and instructor for the Brookdale Respiratory Therapy Program for 7 years. He earned his AAS in Respiratory Therapy from SUNY, BS in Exercise Physiology/Sports Medicine from Manhattan College, and MA in Applied Physiology from Columbia University. Professor O'Shea is an active member of the American Association of Respiratory Care, New Jersey Society of Respiratory Care and the National Academy of Practices in Respiratory Care.



**Maria Caltabiano-Gonzalez MBA, RRT is a senior lecturer.** She has been a Respiratory Therapist for over 13 years, working with adult, pediatric, and neonatal patients in the hospital setting. In addition, she served as an adjunct clinical instructor for Respiratory Therapy programs for several years. Maria earned her AAS in Respiratory Therapy from Salem Community College/ UMDNJ in 2010, a BS in Applied Science and Technology in 2015, and a MBA in Healthcare Administration from Thomas Edison State University in 2017.



**Nicole Scivoletti-Polan, DO is the medical director.**

She is a pulmonologist at Inspira Medical Center Mullica Hill and Inspira Health Center Woodbury. Dr. Scivoletti-Polan earned her medical degree from the Philadelphia College of Osteopathic Medicine, where she also completed her residency in internal medicine. She is board certified by the American Osteopathic Association in internal medicine, pulmonary, and critical care. Dr. Scivoletti-Polan practices collaborative care, working with a team of specialists to help treat her patients.

With a compassionate approach, she works to ensure her patients reach their health goals so they can enjoy day-to-day experiences to the fullest. Dr. Scivoletti-Polan has been named one of South Jersey's top doctors by SJ Magazine in 2019, 2020 and 2021.

**Contact information**

Rowan University  
Virtua Health College of Medicine & Life Sciences  
Rita & Larry Salva School of Nursing & Health Professions  
Respiratory Therapy Program  
1400 Tanyard Road, Inspira Health Sciences Center  
Sewell, NJ 08080

[respiratorytherapy@rowan.edu](mailto:respiratorytherapy@rowan.edu)

**Program Director:** Barry E. Ransom, MS, RRT, RRT-NPS, RRT-ACCS

[ransomb@rowan.edu](mailto:ransomb@rowan.edu)

(856) 256-5907

## INTERVIEW

**Keith Hirst, MS, RRT, RRT-ACCS, RRT-NPS, AE-C**  
Associate Professor, Program Director of Respiratory Therapy  
Massachusetts College of Pharmacy and Health Sciences  
Boston, Massachusetts



---

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

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

#### **- What events/circumstances brought you into the profession?**

As a young boy I grew up with asthma and was regularly seen and treated at the local ER. When an in-patient, treatment included chest percussion and postural drainage twice a day (yes times have changed slightly). This was performed by a physical therapist. Once I got to high school, I thought of being a physical therapist. When I looked at other programs, I saw a school that had respiratory therapy. As I investigated it, it looked interesting, so I considered RT as a backup option in case I did not get into the physical therapy program. I was initially accepted at Northeastern University's Cardiopulmonary Science Program, although I was still trying to get into the physical therapy program. During the 1<sup>st</sup> year we had to take seminar courses. I remember Ken Watson, a supervisor from Boston Children's Hospital who came in to talk to us about the profession; he showed a picture of a patient on ECMO. I thought that was so much more interesting than range of motion PT procedures or any of the other healthcare programs that Northeastern had to offer. At that point, I was hooked and graduated from Northeastern with my BS in RT. It was a decision that I have never regretted. After graduation in 1998, I made my way to Maine and worked at Maine Medical Center in Portland. I also completed my RRT credentialing exams within my first year of work.

## **2. Who were your mentors?**

### **-What/how did they contribute to your career?**

I have been lucky to have many mentors throughout my career. The first would be, Program Director at Northeastern Dr. Tom Barnes. He was in that role when I completed my bachelor's and then was overseeing the Master of Science in Respiratory Care Leadership Program (MSRCL) which I completed in 2010. I was one of the first students to graduate from the MSRCL and I believe the only one to be Tom's students for both the BS and MS degrees. Tom and I regularly kept in touch after I graduated in 1998 and he kept pushing me to be a better therapist. Honestly, he is one of the main reasons I wanted to get into teaching. He steered me to the Northeastern MSRCL program and then in the program constantly challenged me by asking, "What are your 3-5-10 year goals?" (He still asks me about them when I see him now).

Other important mentors are John Thompson and Peter Betit at Boston Childrens Hospital. John was the director and Peter was the assistant director. As a student during clinical rotations, John taught me the importance of being humble and to admit when you are wrong. After becoming an employee, he challenged me to push myself. When I wanted to write up a case study, John and Peter supported that project. They encouraged me to conduct research and supported me getting my master's degree. They encouraged me to do things that were out of my comfort zone and gave me opportunities to demonstrate that I could be a leader; that included writing guidelines and protocols for a new piece of technology that the department purchased. They included me in an initial group of us who were interested in becoming preceptors within the department.

I first met Ellen Becker when she was doing a sabbatical at Boston Children's. I spent time with her and after she left, we kept in touch and as I moved into academia. She was a mentor and helped me by being a sounding board. She later joined the faculty at Rush University where I was the director of clinical education (DCE). Whenever I had a problem with a student, an issue with a course, or any general questions, she listened and helped me see it from a different angle.

Director of Respiratory at Brigham and Women's Hospital Paul Nuccio really helped me fine tune my leadership skills when I was manager of newborn respiratory care. He encouraged me to continue my research and when I had leadership questions, I was able to talk to him. He also pushed me to continue my involvement with the AARC and the Massachusetts Society for Respiratory Care when I moved back to that state.



There are other people with whom I have interacted that either opened doors or advocated for me to better pursue my career. I cannot thank them enough because without their support, I am not sure I would be where 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?**

I entered the field with my bachelor's degree. At the time, I got a lot of comments like, "Why did you do that?" "That was a waste of money!" Whose job are you going after?" There was a time that I did question this. My first position at Maine Medical Center answered that questions as I was pushed along and was cross trained in specialty areas (hemodynamics, neo/peds, transport) which at the time I thought was great and attributed to the fact that I had a BS. After a while, I got bored and started thinking about another career like becoming a PA or CRNA. Life, lucky for me, intervened and my new wife of 4 months and I moved to Massachusetts where I started working at Boston Childrens Hospital. It was there that I worked in a place which placed more value on the additional background in my BSRT. I started to be a clinical preceptor and taught some neo/peds labs. When I was offered the ability to teach at the BS and MS level, I need to get my master's and Northeastern was starting up their MSRCL program. When I made the decision to move back to Massachusetts, the master's allowed me to be a manager of Newborn Respiratory at Brigham and Women's Hospital. My master's along with my experience at Rush University, allowed me to take over the AS program at Quinsigamond Community College and now to be the Program Director at Massachusetts College Pharmacy and Health Sciences (MCPHS) BSRT – Degree Completion program.

If I had not gone back to school and earned my masters, I am not sure any of those same opportunities would have been available to me. While in the MSRCL program, Tom Barnes talked about the role of the AARC and how we should be involved. There were at the time some students who I have become great friends with who were involved with their state society and or the AARC. I started to see the value of being a leader from a different point of view. Not just someone who can help patients at the bedside but help change the profession as it started to evolve. In one of Tom's classes, he had us develop a 3-5-10 year plan which had to include leadership roles. I had also learned that academia requires educators to be active in their profession. When I took my new faculty role at Rush University, I got involved with the Illinois AARC Chapter. At a board meeting of the Illinois Society, I was asked, "Do you want to run for treasurer or delegate?" I said, "delegate," without hesitation!! Being a delegate, I was also part of the Executive

Board for the Illinois Society for Respiratory Care (ISRC). When I moved back to Massachusetts, I continued as a delegate but for the Massachusetts Society.

Being a part of the AARC House of Delegates (HOD), you get an inside look at what the AARC really does for its members. A lot of that is not shared and members don't really realize how much the AARC does for them. When I get a chance to tell students or colleagues about how the AARC really supports them, it really opens their eyes! I tell them how proud I am to be a member of the AARC and to be involved in the HOD to help make changes in the profession and move our profession forward.

To be honest, one thing that drove me to become a leader within our profession was earning my Eagle rank in the Boy Scouts. As an Eagle Scout, you are asked to show leadership, project management, and service by doing an Eagle Scout project that you are asked to develop and lead and overcome any obstacles. My project was to start an elm tree nursery. This hybrid was resistant to the Dutch elm disease which wiped out elm trees in the 1950's and 1960's. I had to develop a plan, obtain funds, and get materials. This meant going to community groups (Rotary, Women's Club, etc.) and community business to get funding or negotiate to purchase supplies. A curve ball that I got was after I had raised the money, I contacted the business where I was to get the tree saplings from and they stated that they need the money to come from the town. I had to go to the board of selectmen of my town. Well, come to find out, for them to distribute money, I need to have the town vote on it at the upcoming town meeting. That meant I had to get an article on the town warrant. which were due in two days, (talk about close call). I submitted an article and then I had to go and discuss this at the town wide meeting. For reference, I was 15 and a sophomore/junior in HS at the time. The board passed the plan, I got my project completed and earned my Eagle Scout award.

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

The first lesson I learned was from John Thompson when I did clinicals and worked at Boston Children's Hospital, was it is OK if you admit you do not know something. If you try and fake it, people will see it. It is better to just say you don't know something but that you will find out the answer and get back to them. As much as we like to show that we know everything, we don't. Sometimes, students will ask me a question and I may not know the answer but after class, I will find the answer and make sure that they get their answer and what my resource was.

You cannot rest on your laurels; you must constantly prove yourself. What is next for you? What is your next challenge? How can you make something better

and take it to the next level. Just because you think you earned something; you still must show that you deserved that recognition. It is easy to say, “I received this recognition so what more do I need to do?” No, you still need to go out and show that yes you deserved it but that they were not wrong in giving you that recognition.

Your colleagues are a great source of ideas and will provide you with feedback. You just need to ASK. I remember I was having a mental roadblock. I was doing stupid things, forgetting to pay attention to the details. A colleague chewed me out at shift report. I let it sit for a bit and then I went to another colleague and asked for an “honest” discussion. It was eye opening to hear what they had to say. I went to my supervisor and had another honest discussion and they stated similar things that they had noticed but then took it a step further to discuss what I can do about it but forced me to come up with the answers and solutions. Be accepting of that feedback. Don’t blow it off. People around you WANT you to succeed.

Lastly, be honest. If you are wrong, admit it. Don’t try and cover your tracks or blame others. Take responsibility, learn from your mistake, and then fix it and remember your lessons. These lessons will come back in some form or another.

I end with a final thought on leadership and being a leader. I do not consider myself under any circumstances to be an outstanding leader. I happen to have situations put in front of me which I rose to take. Admiral Willima Halsey said it best, *“There are no extraordinary men... just extraordinary circumstances that ordinary men are forced to deal with.”* I believe that is true of most of the leaders of most organizations. They are ordinary people who are forced to deal with extraordinary circumstances. You are promoted and seen by your success! For example, you start out working at a hospital, you show consistent clinical skills, you are asked to precept students or new employees, you rise to that occasion. You are asked to take on more tasks and you become a clinical lead, shift supervisor, manager, educator, and a leader. You are by right a victim of your own success because you dealt with a situation and were successful. I just happened to be in the right place at the right time and took advantage of situations afforded to me.

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

As new graduates, you have all this knowledge, and you may feel pressure that you are supposed to be the “cat’s meow”, but you are also still learning. Taking everything in stride. If you don’t know the answer, admit it, and tell them that you will get back to them. Whether it is teaching a course, taking care of a patient, being a part of a clinical initiative or leading a team.

Get involved early!! Reach out to your state society and ask what you can do. They have committees that you do not need to be a part of the board, for example, the Program and Education committee which oversees the annual state conference. It is a great way to get noticed and start to learn the ins and outs. Who knows, someone may ask if you want to be the next state president!!!

If you have not already done so, attend the next AARC state society meeting or International Congress. I tell all my students and graduates, in 2-3 years, plan to go to an AARC Congress. The networking itself makes it worth the cost of the congress. If you are working in a hospital, you may find yourself at the Open Forum research presentations and see something that a hospital did, and you may go back to your leaderships with an idea to reduce ventilator acquired pneumonia (VAP) or start a RT supported intubation program or advocate for a new ventilator that allows therapist to do esophageal balloon monitoring. You may find yourself doing research and then attending an AARC congress presenting your abstract.

Find a mentor or a trusted individual that you can talk to. We think of mentoring as a formal thing but the ability to sit down and have honest conversations with a colleague can be just as valuable. Find an individual who you can trust, be honest with you, and is willing.

Never, I repeat never, turn down an opportunity. At minimum express interest that you'd like to be considered. You may not get picked, but it lets your manager/director know that you are interested in broadening your horizons. If you do a good job, you may then be afforded additional opportunities. Sometimes the experience of interviewing for higher positions or opportunity may give you insight on whether that is something that you really want to do. For example, when I applied to be a DCE at Rush, I did not figure out how to get the position. However, I interviewed well enough that I was brought on as faculty and was eventually able to get the position as the program's DCE. That experience eventually set me up for becoming program director at MCPHS because I had experience teaching at a BS/MS level versus at the associate's level. When I was asked to be part of the initial advisory board when a group led by Peter Betit wanted to create an online BSRT degree completion program, I was considered because of my experience teaching at the BS/MS level. I said yes and being on the board probably gave me an edge when the program director position was later posted. Now I am the program director at MCPHS. You never know what door will open by saying, "YES! I am interested or would like to be considered."

## 2024 Executive Council

At the July 2023 Board of Directors Meeting in Ft. Lauderdale the following Executive Council positions were nominated, voted, and approved unanimously by the quorum of the board present for the 2024 calendar year.



Dr. Christy Kane moves from Past-President to President-Emeritus



Dr. Gregg Marshall moves from President to Past-President



Dr. Douglas Gardenhire moves from President-Elect to President



Dr. Kimberly Clark was elected to President-Elect. She has been serving as the Vice President of External Affairs





Dr. Daneen Nasters was elected to Vice President of External Affairs



Janelle Gardiner was reelected to Vice President of Internal Affairs



Dr. Chris Russian was reelected to Vice President of Research



Dr. Jamy Chulak was extended his position as Chair of the Institutional Members Council

## CoBGRTE Scholarships Reminder

### The Mission Continues

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

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

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

**2. There are four award categories:**

**a. Merit Scholarships (\$8,000)**

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

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

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

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

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

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

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

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

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

- eligibility (RRT, CoBGRTE member, current faculty member or pursuing faculty position, enrolled in doctoral program)
- required materials (proposal for required funds that includes budget/justification; letter of support from Chair/Dean; CV)
- award \$5,000 to \$10,000 based on proposal/need

**Members of the CoBGRTE Scholarship Committee**

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

## INTERNATIONAL INTERVIEW



**Mabel Klutse, B.S.**

**UTMB Graduate Student  
Formerly a Volunteer Teaching Assistant for the  
Respiratory Therapy Department of the  
University of Ghana**

---

**By José D Rojas, PhD, RRT, RPFT, FAARC  
Assistant Dean for Diversity, Equity, and Inclusion  
Associate Professor and Chair  
University of Texas Medical Branch  
School of Health Professions  
Galveston, Texas**

The global need for respiratory therapists has never been greater! The United States is not the only country to realize and appreciate the shortage. However, other countries are looking to the United States for training, access to the National Board for Respiratory Care registered respiratory therapist credential (RRT), and a graduate education. They recognize the importance of developing a workforce equipped with training and expertise in developing and assessing the best evidence-based practices for all aspects of respiratory therapy. As we have transitioned our program from a baccalaureate to masters entry-level, we have been impressed with the quality of international applicants. These applicants desire to see the structure of educational programs, as well as the scope of practice of respiratory therapy in an environment that is not resource limited. The hope of many of these applicants is to develop the experience and skills needed to be seen as expert clinicians, educators, leaders, and researchers. Some even desire to pursue doctoral degrees so that they can ultimately further develop the art and science of respiratory and take what they have learned to their own countries. We as members of CoBGRTE have a unique opportunity to help support these students in that desire. First and foremost, we should invite them to become members and then mentor them in their journey. The CoBGRTE membership has an unmet capacity for networking and mentorship opportunities!

With this interview, allow me to introduce you to Mable Klutse. Mable is a first-year student in our master's entry-level program who came to us from Ghana after completing a baccalaureate degree in respiratory therapy at the University of Ghana in 2020. Upon graduation, she worked as a teaching

assistant from 2020 -2021. She was then hired as a therapist at the Korle-Bu teaching hospital in Ghana, where she worked until coming to Galveston. When Mabel interviewed for our program, she completely captivated the panel with her passion and desire to further her training so that she ultimately could bring that training to her own country. As I have watched her interact with her peers on campus, I find her to be inspiring and a great resource for our own students. For those reasons, I interviewed Mable with the purpose of introducing her to CoBGRTE membership.

**1. Can you tell us a little about your background in Ghana?**

I come from Ghana, a country in Western Africa, situated on the coast of the Gulf of Guinea. As a first-generation low-income student from a family of seven. I have navigated through various situations that hindered my journey to becoming a competent respiratory therapist. After completing my undergraduate studies for a bachelor's degree in respiratory therapy at the University of Ghana, I voluntarily served my country for a year by becoming a teaching assistant at the Respiratory Therapy department of the University of Ghana. Additionally, I worked as a respiratory therapist at the pediatric intensive care unit of the Korle-Bu Teaching Hospital in Ghana for two years. In this role, I was involved in the diagnosis, treatment, and management of patients with cardiopulmonary disorders.

**2. What motivated you to continue your education in the US and what do you hope to gain from this experience?**

I believe that the diagnosis and management of patients with cardiopulmonary disorders, especially the management of mechanically ventilated patients need reform in Ghana, my home country. The need for this reform inspired my decision to apply for the master's in respiratory therapy program at the University of Texas Medical Branch where I am currently pursuing my graduate studies in respiratory care.

In the next five years, I aspire to be the head of the Respiratory Therapy Department at the University of Ghana, so I can train more students who will help in the development of new protocols and reform old protocols used in the management of mechanically ventilated patients. Also, I will be instrumental in the training of competent respiratory therapists since approximately fifty respiratory therapists are serving over thirty-two million residents of Ghana. I also hope to set up more pulmonary rehabilitation centers in my country to facilitate easy accessibility to these services by all who require rehabilitation care.



**3. What have been some of your biggest challenges as you transitioned to life as a student here in the US?**

My challenges as a new student in the US are high tuition fees, increased cost of living, and insomnia (due to the difficulty in adjusting to the different time zones).

**4. What have been some of the brightest consequences of this adventure?**

I have gained cultural diversity exposure here in the US.

**5. How do you maintain a balance between studying and enjoying life?**

I know school can be overwhelming at times, so I always try my best to plan. I set deadlines and schedule timetables for myself so I can complete my assessments, quizzes, and study schedules to have the opportunity to relax at the beach or try out new foods when I'm free.

**6. If you had any difficulty during this transition, who or what was your best source of support?**

Throughout all these difficulties my family, faculty members, friends, and roommate have been my support system. I am so grateful for having you all in my life.

**7. What words of wisdom/advice would you give anyone from Ghana and/or any other country considering the possibility of pursuing a graduate degree in respiratory therapy in the US?**

My advice to anyone from Ghana or another country considering the possibility of pursuing a graduate degree in Respiratory Therapy, I would like to say that you are making the best decision that your future self will be grateful for. You will not only be making a difference in the lives of patients with cardiopulmonary disorders but also securing a better future for your family as well. Trust me the number of COPD patients that you are going to help in the next five years is going to increase due to our cooking methods (cooking with firewood) as well as our exposure to vaping devices.

## Research Article Abstract

### RT education and COVID-19 pneumonia discharge quality

Ramandeep Kaur, Anne Geistkemper, Riten Mitra, Ellen A. Becker

[Kaur R, Geistkemper A, Mitra R, Becker EA. RT education and COVID-19 pneumonia discharge quality. \*Canadian Journal of Respiratory Therapy\*. 2023;59:190-203. doi:10.29390/001c.87641](#)

(Reprinted from the *Canadian Journal of Respiratory Therapy* with permission from the Canadian Society of Respiratory Therapy)

## Abstract

### Background

There is a lack of data assessing the influence of respiratory therapist (RT) education on clinical outcomes. The primary objective of this study was to evaluate the impact of RTs holding advanced degrees or completing adult critical care competencies on discharge outcomes of patients with COVID-19 pneumonia.

### Study Design and Methods

This retrospective, cross-sectional study included adults with confirmed COVID-19 admitted to the hospital for at least three days between March-May 2020. The academic degree held by each RT was considered advanced (baccalaureate or higher) or associate degree. Discharge outcomes were considered good, compromised, or poor when subjects' hospital discharge was directly to home, long-term care facility/rehabilitation center, or hospice/died, respectively. A time-to-event multi-state regression model was used to determine the impact of RT academic degree and adult critical care competencies on discharge outcomes using  $\alpha=0.05$ .

### Results

A total of 260 subjects (median age 59 y; 166 males) received clinical care from 132 RTs. RT median professional experience was six y (IQR 3-11), 70.8% had an advanced degree, and 70.8% completed adult critical care competencies. The time-to-event multi-state regression model showed that patients with >85% exposure to RTs with advanced degrees transitioned 3.72 times more frequently to good outcomes than RTs without advanced degrees ( $p=.001$ ). Similarly, patients with >85% exposure to RTs with adult critical care competencies transitioned 5.10

times more frequently to good outcomes than RTs without adult critical care competencies ( $p < .001$ ).

## **Conclusion**

Patients with COVID-19 pneumonia who received greater than 85% of their care by RTs who earned advanced degrees or completed adult critical care competencies had improved discharge outcomes. This preliminary work suggests that advancing education for the respiratory therapist workforce may improve the discharge quality of patients with acute respiratory failure and should be further explored.

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

**[BSRT and MSRT Entry Programs](#)**

**[Graduate Respiratory Therapist Programs](#)**

**[www.CoBGRTE.org](http://www.CoBGRTE.org)**

## **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**

***SAVE THE DATE***

**CoBGRTE  
ROUND TABLE DINNER**

***TUESDAY, NOVEMBER 7<sup>TH</sup>***

***7:00-9:00 PM***

**BAVARIAN BIERHAUS**  
***NASHVILLE'S ONLY AUTHENTIC GERMAN BIERHALL***

*121 Opry Mills Drive Nashville*

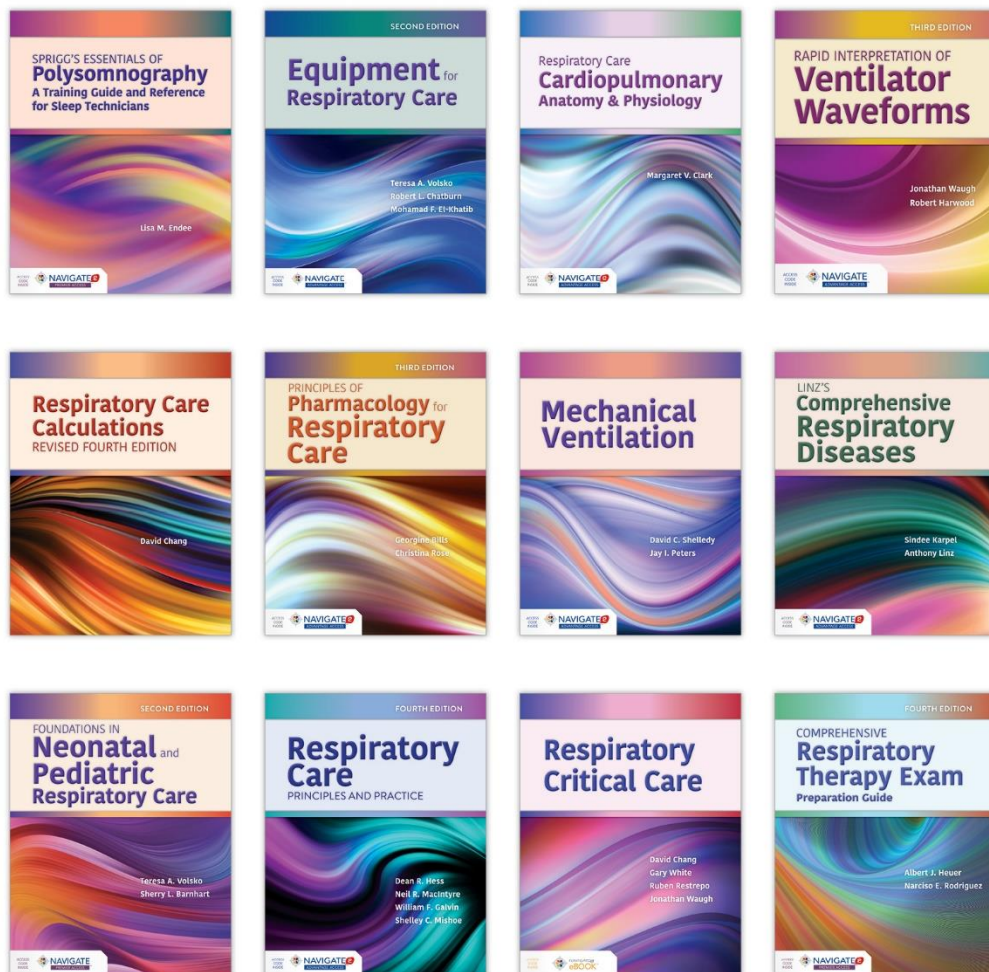
1 mile from the Opry Hotel by car (19 min walk, 4 min by car)

**RSVP: <http://cobgrte.org/contactcobgrte.html>**  
***Space is limited RSVP early***





# A Full-Curriculum Approach to Respiratory Care Education



Learn More and Get Access  
[go.JBLearning.com/RespiratoryCare](https://go.JBLearning.com/RespiratoryCare)





## **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](http://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**

---

**Thomas A. Barnes, EdD, RRT, FAARC - Editor in Chief**

Northeastern University  
Boston, Massachusetts

**Will Beachey, PhD, RRT, FAARC**

CHI St. Alexius Health/University of Mary  
Bismarck, North Dakota

**Randy Case, PhD, RRT, RRT-NPS**

Midwestern State University  
Wichita Falls, Texas

**Paul Eberle, PhD, RRT, FAARC**

Weber State University  
Ogden, Utah

**Christy Kane, PhD, RRT, RRT-ACCS, RRT-NPS, AE-C, FAARC**

Bellarmino University  
Louisville, Kentucky

**Gregg Marshall, PhD, RRT, RPSGT, RST, FAARC**

Texas State University – Round Rock Campus  
Round Rock, Texas

**Timothy Op't Holt, EdD, RRT, AE-C, FAARC**

University of South Alabama  
Mobile, Alabama

**José D. Rojas, PhD, RRT, RPFT, FAARC**

University of Texas Medical Branch at Galveston  
Galveston, Texas

**Jeffrey J. Ward, MEd, RRT, FAARC**

Mayo Clinic Multidisciplinary Medical Simulation Center  
Rochester, Minnesota



***“Dedicated to Improving Respiratory Therapy Education”***

**[www.cobgrte.org](http://www.cobgrte.org)**