

*Financial assistance is available to those who qualify, and we offer placement assistance.*

RESPIRATORY THERAPY

## RESPIRATORY THERAPY AAS

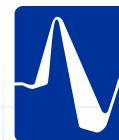
**RESPIRATORY THERAPISTS**, also known as Respiratory Care Practitioners, evaluate, treat and care for patients with breathing disorders. They work with all ages of patients from premature infants to the very elderly. Practicing under the direction of a physician, Respiratory Therapists assume primary responsibility for the respiratory care of patients. They conduct cardiopulmonary diagnostic testing, evaluate patients to determine the need for respiratory care and administer therapeutic treatments and consult with physicians and other health care professionals to develop, monitor and modify patient care plans. Respiratory Therapists care for patients on life support systems where they initiate and manage mechanical ventilation. They also administer inhaled medications, teach patients and their families how to manage chronic respiratory disease, and perform bedside testing to evaluate patient need for respiratory therapy and evaluate the effectiveness of treatment. The program objective is to prepare students to function as competent advanced-level Respiratory Care Practitioners.

**In addition to** the general duties outlined above, there are numerous specialty areas of practice that a Respiratory Therapist may pursue including polysomnography (sleep study), pediatric and neonatal respiratory care, pulmonary function testing, asthma education, geriatric care, medical product sales and marketing, or health care management/administration. Respiratory Therapists are employed by adult and pediatric hospitals, rehabilitation centers, physician offices, pulmonary function laboratories, home medical care companies, ground and air medical ambulance transport services, sleep-study centers, and neonatal intensive care units.

**SLCHC GRADUATES** are eligible to apply to sit for the board examination series administered by the National Board for Respiratory Care (NBRC) to earn the Registered Respiratory Therapist (R.R.T.) credential.

*A person might survive for 3 weeks without food...  
A person might survive 3 days without water...  
A person will die in 3 minutes without oxygen.*

**Breathe new life into your career.**



ST. LOUIS COLLEGE  
of HEALTH CAREERS

SLCHC.EDU

COUNTY CAMPUS:  
1297 N. Highway Dr.  
Fenton, MO 63026  
**636.529.0000**

[www.slchc.edu](http://www.slchc.edu)



Come Here, ... **GO ANYWHERE**

# RESPIRATORY THERAPY ASSOCIATE

Associate				
Course #	Course	Hours	Credits	
<b>Semester I</b>				
AH100	Professional Development	45	3	
MTH202	Algebra & Mathematical Functions	45	3	
BL121	Essentials of Anatomy & Physiology	45	3	
BL121L	Essentials of Anatomy & Physiology Lab	30	1	
HB300	Medical Terminology Basics	30	1	
PS101	Psychology	45	3	
<b>Semester II</b>				
BL130	Cardiopulmonary Anatomy and Physiology	45	3	
IHS101	Integrated Health	45	3	
HC101	Ethics in Health Care	45	3	
ENG101	English Composition	45	3	
<b>Semester III</b>				
EN150	Communications	45	3	
RC104	Respiratory Care Pharmacology	45	3	
PC102	Respiratory Care Practices and Procedures I	45	3	
RCL102	Respiratory Care Lab I	60	2	
PCC102	Respiratory Care Clinical Practicum I	90	2	
<b>Semester IV</b>				
RC109	Cardiopulmonary Testing (ABG/PFT)	45	3	
RC106	Respiratory Care Pathology	30	2	
RC107	Mechanical Vent Practices and Procedures II	45	3	
RC107L	Respiratory Care Lab II	60	2	
RCC110	Respiratory Care Clinical Practicum II	180	4	
<b>Semester V</b>				
PS301	Critical Thinking	30	2	
RC216	Respiratory Care in Alternative Settings	30	2	
RC211	Neonatal/Pediatric Respiratory Practices & Procedures III	45	3	
RC211L	Respiratory Care Lab III	60	2	
RCC214	Respiratory Care Clinical Practicum III	225	5	
<b>Semester VI</b>				
RC215	Advanced Mechanical Vent Practice and Procedure IV	45	3	
RC219	Comprehensive Final Review / Exit	60	2	
RCL217	Respiratory Care Level IV / Skill Review	90	3	
RCC218	Respiratory Care Clinical Practicum IV	270	6	
<b>90 Weeks</b>	<b>Program Total</b>	<b>1920</b>	<b>81</b>	

## What will you learn?

Many hospitals and medical centers prefer to have the Respiratory Therapists on their staff to have a Bachelor's degree. Some managers believe that a Bachelor's degree will become mandatory for Respiratory Therapists to have in the near future. The increase in demand for qualified Respiratory Therapists in this area requires an increase in Bachelor programs. The main objective of the Online Bachelor's Completion Program is to give Respiratory Therapists in the area who have the required credentials an opportunity to earn their Bachelor's degree while working in the field.

## Graduate Opportunities:

Respiratory Therapists are employed by adult and pediatric hospitals, rehabilitation centers, physician offices, pulmonary function laboratories, home medical care companies, ground and air medical ambulance transport services, sleep-study centers, and neonatal intensive care units.

## Certification:

SLCHC graduates are eligible to sit for the board examination series administered by the National Board for Respiratory Care (NBRC) to earn the Registered Respiratory Therapist (R.R.T.) credential.

\*Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, 2016-17 Edition, Respiratory Therapist, on the Internet at <https://www.bls.gov/ooh/healthcare/respiratory-therapists.htm>

Fill out the online application or to request an application packet contact:

**CITY CAMPUS**  
909 S Taylor  
St. Louis, MO 63110  
(314)652-0300

**COUNTY CAMPUS**  
1297 N Hwy. Drive  
Fenton, MO 63026  
(636)529-0000

[admissions@slchcmail.com](mailto:admissions@slchcmail.com)



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## APPLICATION FOR ADMISSIONS

*Please complete all items on both sides of this form, and print legibly in ink.*

**Withholding information requested on this application or giving false information may delay or void admission or result in dismissal following admission.**

### PERSONAL INFORMATION

Name: Last	First	Middle Initial	Maiden	Social Security #
Present Address: Number & Street	City	State	Zip	Area Code & Home Telephone #
Date of Birth	Place of Birth	State of Permanent Residence	Area Code & Cell Telephone #	
Are you at U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever served or are you now serving in the Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No			E-Mail Address
Dates of Service: _____				

**I agree to allow all SLCHC team members to call, text or email me using the info above: \_\_\_\_\_ (initial please)**

### ADMISSIONS INFORMATION

Today's Date (Month – Date – Year)	Application Status: <input type="checkbox"/> New Student <input type="checkbox"/> Independent <input type="checkbox"/> Readmission <input type="checkbox"/> Dependent	If a Readmission, date previously attended:	Program in which previously enrolled:
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#### PLEASE INDICATE PROGRAM & SCHEDULE OF INTEREST:

<b>CITY CAMPUS PROGRAMS:</b> <input type="checkbox"/> Medical Assistant <input type="checkbox"/> Medical Assistant (AAS) <input type="checkbox"/> Patient Care Technician <input type="checkbox"/> Medical Office Administration <input type="checkbox"/> Professional Medical Billing (AAS) <input type="checkbox"/> Pharmacy Technician <input type="checkbox"/> Pharmacy Technician (AAS)	<b>SCHEDULE:</b> <input type="checkbox"/> DAY <input type="checkbox"/> EVENING	<b>COUNTY CAMPUS PROGRAMS:</b> <input type="checkbox"/> Medical Assistant <input type="checkbox"/> Medical Assistant (AAS) <input type="checkbox"/> Occupational Therapy Assistant (AAS) <input type="checkbox"/> Patient Care Technician <input type="checkbox"/> Pharmacy Technician <input type="checkbox"/> Pharmacy Technician (AAS) <input type="checkbox"/> Physical Therapist Assistant (AAS) <input type="checkbox"/> Practical Nursing <input type="checkbox"/> Respiratory Therapy (AAS)	<b>SCHEDULE:</b> <input type="checkbox"/> DAY <input type="checkbox"/> EVENING
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### EDUCATIONAL INFORMATION

<b>ATTESTATION</b>		Do you have a high school diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No Graduation Date: _____	
By my signature on the reverse of this application, I declare that I have achieved high school or equivalent graduate status, and the information I am providing on this application is accurate and valid.		Do you have a GED certification <input type="checkbox"/> Yes <input type="checkbox"/> No Date Earned: _____	
High School Name	City, State	Dates Attended	Diploma

Name of School	City	State	Dates Attended	Diploma/Degree/ # of Hours
College/University				
College/University				
Other				

