Respiratory Therapy

Metropolitan Community College offers an Associate of Applied Science Degree in Respiratory Therapy. Successful completion of the Respiratory Therapy program prepares graduates to sit for national exams through the NBRC and obtain state license for practice. *Some states may require additional education to obtain a state license; students should contact the licensure board for specific requirements.

The two-year program provides classroom instruction, lab experience and clinical practice to prepare students for work in a variety of healthcare environments throughout the community.

Admission process

Within 30 days of application deadline, all applications will be reviewed. Applicants are notified of admission status by U.S. mail. Applicants determined to be eligible for admission will be ranked according to the following factors:

- The applicant’s GPA of the pre-entrance courses as of the application deadline. (All course grades must be a C or higher.)
- Completion of the PSB Health Occupations Exam (exam score will be calculated by a formula to arrive at the PSB point value.) The PSB Exam can be taken three times in a two-year period.
- Submission of all official transcripts from other colleges, if other than MCC, to the Records department. Transcripts must be submitted two weeks prior to application deadline to be evaluated.
- Signed Respiratory Therapy Program Technical standards.
- Completion of all admission requirements and program application by the application deadline.
- The applicant will be assigned point values based on the general education and other required coursework completed by the application deadline. Only courses completed with a grade of C or higher are counted (with the most recent grade used).

Send all of the above to:

- Respiratory Therapy Program Director
  South Omaha Campus, Mahoney Building, room 517
  531-MCC-4653
  P.O. Box 3777
  Omaha, NE 68103-0777

Admission Criteria

Final admission to the Respiratory Therapy program will be based on receipt of completed background check, abuse registry check, and drug screening. Details regarding these tests will be given upon acceptance to the program.

Students in the Respiratory Therapy program will be required to show documentation of a physical examination along with record of required immunizations. They must also complete a CPR course for Healthcare providers. Details will be provided upon formal acceptance to the program.

The Respiratory Therapy program is accredited by the Commission on Accreditation for Respiratory Care (CoARC).

264 Precision Blvd. Telford, TN 37690 | (817) 283-2835
# Respiratory Therapy program requirements

## General Education Requirements

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credit Hrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENGL 1010</td>
<td>English Composition I</td>
<td>4.5</td>
</tr>
<tr>
<td>ENGL 1020</td>
<td>English Composition II</td>
<td>4.5</td>
</tr>
<tr>
<td>PYSC 1010</td>
<td>Introduction to Psychology</td>
<td>4.5</td>
</tr>
<tr>
<td>MATH 1315</td>
<td>College Algebra</td>
<td>4.5</td>
</tr>
<tr>
<td>BIOS 2150</td>
<td>Microbiology</td>
<td>6.0</td>
</tr>
<tr>
<td>HRML 1010</td>
<td>Human Relations Skills</td>
<td>4.5</td>
</tr>
<tr>
<td>INFO 1001</td>
<td>Information Systems and Literacy</td>
<td>4.5</td>
</tr>
</tbody>
</table>

The General Education requirement for this degree program exceeds the minimum standard number of hours. For more information, contact Student Services.

*Additional prerequisite(s) may be required.*

## Other Requirements for Respiratory Therapy

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credit Hrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOS 1010</td>
<td>Introduction to Biology and Human Anatomy and Physiology</td>
<td>6.0</td>
</tr>
<tr>
<td>BIOS 1310</td>
<td>Survey Human Anatomy and Physiology OR Human Anatomy and Physiology I</td>
<td>5.0</td>
</tr>
<tr>
<td>BIOS 2310</td>
<td>Human Anatomy and Physiology I</td>
<td>6.0</td>
</tr>
<tr>
<td>BIOS 2320</td>
<td>Human Anatomy and Physiology II</td>
<td>6.0</td>
</tr>
<tr>
<td>CHEM 1010</td>
<td>College Chemistry</td>
<td>6.0</td>
</tr>
<tr>
<td>PHYS 1010</td>
<td>Applied Physics</td>
<td>4.5</td>
</tr>
</tbody>
</table>

## Requirements for Respiratory Therapy

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credit Hrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESP 1000</td>
<td>Orientation to Respiratory Care</td>
<td>3.0</td>
</tr>
<tr>
<td>RESP 1010</td>
<td>Introduction to Respiratory Care Procedures</td>
<td>4.5</td>
</tr>
<tr>
<td>RESP 1020</td>
<td>Cardiopulmonary Anatomy and Physiology</td>
<td>4.5</td>
</tr>
<tr>
<td>RESP 1030</td>
<td>Respiratory Care Procedures I</td>
<td>4.5</td>
</tr>
<tr>
<td>RESP 1031</td>
<td>Current Concepts I</td>
<td>2.0</td>
</tr>
<tr>
<td>RESP 1040</td>
<td>Respiratory Care Procedures II</td>
<td>4.5</td>
</tr>
<tr>
<td>RESP 1041</td>
<td>Current Concepts II</td>
<td>2.0</td>
</tr>
<tr>
<td>RESP 1042</td>
<td>Pharmacology for Respiratory Care</td>
<td>3.0</td>
</tr>
<tr>
<td>RESP 1991</td>
<td>Clinical Practicum I</td>
<td>5.5</td>
</tr>
<tr>
<td>RESP 1992</td>
<td>Clinical Practicum II</td>
<td>5.5</td>
</tr>
<tr>
<td>RESP 1993</td>
<td>Clinical Practicum III</td>
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<tr>
<td>RESP 2100</td>
<td>Advanced Respiratory Care</td>
<td>4.5</td>
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<tr>
<td>RESP 2101</td>
<td>Current Concepts III</td>
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</tr>
<tr>
<td>RESP 2120</td>
<td>Cardiology and Hemodynamics</td>
<td>3.0</td>
</tr>
<tr>
<td>RESP 2121</td>
<td>Current Concepts IV</td>
<td>2.0</td>
</tr>
<tr>
<td>RESP 2122</td>
<td>Pediatric and Neonatal Respiratory Care</td>
<td>3.0</td>
</tr>
<tr>
<td>RESP 2131</td>
<td>Current Concepts V</td>
<td>2.0</td>
</tr>
<tr>
<td>RESP 2132</td>
<td>Respiratory Care Seminar</td>
<td>4.5</td>
</tr>
<tr>
<td>RESP 2994</td>
<td>Clinical Practicum IV</td>
<td>5.5</td>
</tr>
<tr>
<td>RESP 2995</td>
<td>Clinical Practicum V</td>
<td>5.5</td>
</tr>
</tbody>
</table>

## Admission

BIOS 2320 or BIOS 1310 and CHEM 1010 must be completed prior to acceptance into the Respiratory Therapy program. Students are strongly encouraged to complete all general education and prerequisite courses before beginning the program; however, one or two of the prerequisites can be taken during the first quarter of the program.

For a complete description of courses, visit mccneb.edu/healthcareers.

Admission criteria is subject to change based on current legislation, state licensure requirements and professional accrediting body requirements.
Personal (print or type)

Full legal name _________________________________
(last) (first) (full middle) (maiden)

MCC student ID, Social Security or I-94 number ______________________________________

Home or mailing address ___________________________________________________________
(street) (city) (state) (ZIP)

Employer _____________________________________________________________
(name) (address)

Telephone _____________________________________________________________
(home) (work) (cell, circle one: iPhone or Android)

Email _________________________________________________________________
(personal email) (MCC email)

Gender: □ male □ female Birth date _________________________________
(month) (day) (year)

Marital status:
□ single □ married □ widowed □ divorced

U.S. citizen: □ yes □ no

If no, type of visa: □ student □ permanent □ other ________________

Have you previously enrolled at MCC? □ no □ yes dates ________________________________

Do you have a □ high school diploma or □ GED year received ______________________________

Name of granting institution _______________________________________________________

Address of granting institution ______________________________________________________
(street) (city) (state) (ZIP)

Colleges previously attended other than MCC (if applicable): 
(In order to complete the application process, all colleges/universities you have attended must send an official academic transcript to Metropolitan Community College, Records, P.O. Box 3777, Omaha, NE 68103-0777.)

<table>
<thead>
<tr>
<th>College</th>
<th>Address</th>
<th>Dates attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
RESPIRATORY THERAPY APPLICATION FORM cont.

Furnishing the following information is not a requirement for admission and will not be used in admissions discussions. The data will be used for statistical purposes only.

Are you: ☐ Hispanic/Latino ☐ Non-Hispanic/Latino

For those individuals who are non-Hispanic/Latino, select one or more of the following:
- ☐ American/Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Hawaiian/Pacific Islander
- ☐ White

I certify that to the best of my knowledge, the information furnished in this application is true and complete. I agree that if such information or any other information upon which my admission is based is not true or complete, the College may rescind my acceptance. I further agree that I will abide by the rules and regulations of the College, including but not limited to those rules contained in the current College catalog.

I acknowledge that all official transcripts that I forward to the College become the property of the College and will not be forwarded to another institution or returned to me.

Applicant’s signature _____________________________ Date _______________

Metropolitan Community College does not discriminate on the basis of race, color, national origin, religion, sex, marital status, age, disability or sexual orientation in admission or access to its programs and activities or in its treatment or hiring of employees. The College complies with Title VI of the Civil Rights Act of 1964, the Civil Rights Act of 1990, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990, as amended, the Age Discrimination Act of 1975, related Executive Orders 11246 and 11375 and all civil rights laws of the State of Nebraska and the City of Omaha.

Contacts:

Concerning Title VI (race), Title IX (gender equity), Section 504 (disability) and Americans with Disabilities Act/Program and Services Accessibility, and Age, contact:

   Vice president for Campuses and Student Affairs: 531-MCC-2681 (students)
   Associate vice president of Human Resources: 531-MCC-2236 (employees)
   Director of Facilities: 531-MCC-2529 (accessibility)

Concerning hiring and employment-related complaints of discrimination or harassment based on race, color, national origin, religion, sex, marital status, age, disability, sexual orientation, retaliation or for affirmative action and diversity issues, contact:

   Associate vice president for Equity and Diversity: 531-MCC-2649

The address for all of the above individuals is as follows:
   Metropolitan Community College
   30th and Fort streets
   P.O. Box 3777
   Omaha, NE 68103-0777
All Respiratory Care students are required to meet definite standards for the profession and for clinical performance. The following are specific requirements of all students:

1. Ability to stand, sit, walk, push and squat.
2. Ability to lift and/or carry 50 pounds.
3. Ability to reach in forward, lateral, and overhead motions.
4. Ability to climb stairs.
5. Ability to distinguish distance, colors, objects, and persons.
6. Demonstrate depth perception.
7. Ability to hear conversations, monitor equipment, perform auscultation, use telephone and distinguish background noise.
8. Ability to distinguish sharp/dull and hot/cold.
9. Perform fine and gross motor skills with both hands.
10. Ability to think clearly and calmly in stressful situations.
11. Ability to communicate effectively, both verbally and in writing, using appropriate grammar, spelling and vocabulary.
12. Ability to work cooperatively with others.

I have read the above technical standards and acknowledge that I comply with each of them.

________________________________________
Student

________________________________________
Date
All applicants should talk with an MCC advisor prior to submitting their application. An appointment can be made by calling 531-MCC-2400.

Application period: __________       Entry: June 1 application deadline __________

Student name ____________________________________________  MCC student ID # __________

Attached items

☐ Completed and signed application forms (Page 3-4)
☐ Copies of official transcripts from other colleges attended (if applicable) sent to MCC Records office
☐ General education course requirements (must be completed two weeks before application deadline)
☐ PSB Health Occupations Exam

General education prerequisites:

CHEM 1010 – College Chemistry - Grade ____
ENGL 1010 – English Composition I - Grade ____
ENGL 1020 – English Composition II - Grade ____
MATH 1315 – College Algebra - Grade ____
HMRL 1010 - Human Relations Skills - Grade ____
INFO 1001 - Information Systems and Literacy - Grade ____
PHYS 1010 - Applied Physics - Grade ____
PSYC 1010 - Introduction to Psychology - Grade ____
BIOS 1010 - Introduction to Biology - Grade ____
BIOS 2150 - Microbiology - Grade ____
BIOS 2310 – Human Anatomy and Physiology I - Grade ____
BIOS 2320 – Human Anatomy and Physiology II- Grade ____
OR
BIOS 1310 – Survey Human Anatomy and Physiology - Grade ____

NOTE: BIOS 2320 or BIOS 1310 and CHEM 1010 must be completed prior to acceptance into the Respiratory Therapy program.

Student signature ____________________________  Advisor signature ____________________________

Date _________________  Date _________________

Return completed form to:
Metropolitan Community College: Respiratory Therapy Program Director
P.O. Box 3777, Omaha, NE 68103-0777