



Chattahoochee Technical College – Respiratory Care

Respiratory Care Program Optional Observation Hours Instructions

Purpose

- A firsthand understanding of the daily responsibilities of a respiratory therapist.
- Exposure to patient care procedures, respiratory equipment, and clinical workflow in a hospital setting.
- Opportunity to observe respiratory therapy services such as oxygen therapy, ventilator management, aerosol treatments, and patient assessments.
- An informed perspective to confirm interest in the respiratory care profession.

Requirements

- Twelve (12) observation hours must be completed in a hospital respiratory therapy department under supervision of a licensed respiratory therapist (CRT or RRT).
- Observation must be completed within 12 months prior to the application deadline.
- Observation hours are all-or-nothing; partial hours will not be accepted.
- All experiences must be documented on the official Respiratory Care Observation Verification Form and signed by the supervising therapist.
- Dress Code: medical scrubs or business casual attire. Jeans, shorts, T-shirts, leggings, and open-toed shoes are not permitted.
- Applicants must comply with all hospital confidentiality and infection control policies.

Submission Instructions

- Obtain the Respiratory Care Observation Verification Form from the program admissions webpage.
- Contact a hospital respiratory therapy department to request observation permission.
- Complete the twelve-hour observation in one or two sessions as allowed by the facility.
- Have the supervising therapist complete and sign the verification form.
- Submit the completed form by mail or place in the drop box at the Health Education Center by the application deadline.



Important Notes

- Observation hours are optional but strongly encouraged.
- Applicants completing the full six hours receive ten (10) bonus points toward competitive admission.
- Facilities may require additional documentation such as immunizations, confidentiality agreements, or background checks.

Participating Observation Sites

- Applicants may complete their observation at any hospital or imaging facility that can fulfill the requirements of this form. The following facilities have previously agreed to accept observation students from Chattahoochee Technical College: •
- Piedmont Cartersville Hospital: Contact Doug Malick at douglas.malick@piedmont.org to schedule.
- Northside Cherokee Hospital: Various Locations Contact: job.shadow@northside.com
- Wellstar at Various Locations o Contact: Visit www.wellstar.org/volunteer and select your desired hospital/College Volunteers. Complete the online application and include in your comments that you are a Chattahoochee Respiratory Shadowing Student.

Completed forms may be mailed or placed in the drop box at:

Submission Address
Chattahoochee Technical College
Health Education Center – Building F
Attn: Respiratory Care Department
5198 Ross Road
Acworth, Georgia 30102



Chattahoochee Tech Respiratory Care Observation Verification Form

Applicant Name: _____

Applicant 900#: _____

Date(s) of Observation: _____

Total Hours Completed: _____

Facility Name: _____

Department Observed: Respiratory Therapy

Supervising Therapist Name: _____

Therapist Credentials (CRT/RRT): _____

Therapist Contact Email/Phone: _____

Evaluation (Completed by Supervising Therapist)

Please indicate Yes or No for each statement below.

Observed respiratory therapy procedures Yes No

Applicant presented professional behavior Yes No

Applicant arrived on time Yes No

Applicant demonstrated interest in patient care Yes No

Applicant showed enthusiasm toward the profession Yes No

Note: Applicants will receive bonus points only if all responses above are marked "Yes."



Supervising Technologist Verification

I verify that the applicant named above has completed twelve (12) hours of observation in the radiology/imaging department listed and conducted themselves in accordance with professional standards.

Technologist Signature: _____

Date: _____

Applicant Acknowledgment

I acknowledge that I have completed twelve (12) hours of observation as described above. I understand that observation hours are optional and that I will receive Ten (10) bonus points toward competitive admission only if all evaluation items above are marked "Yes."

Applicant Signature: _____

Date: _____