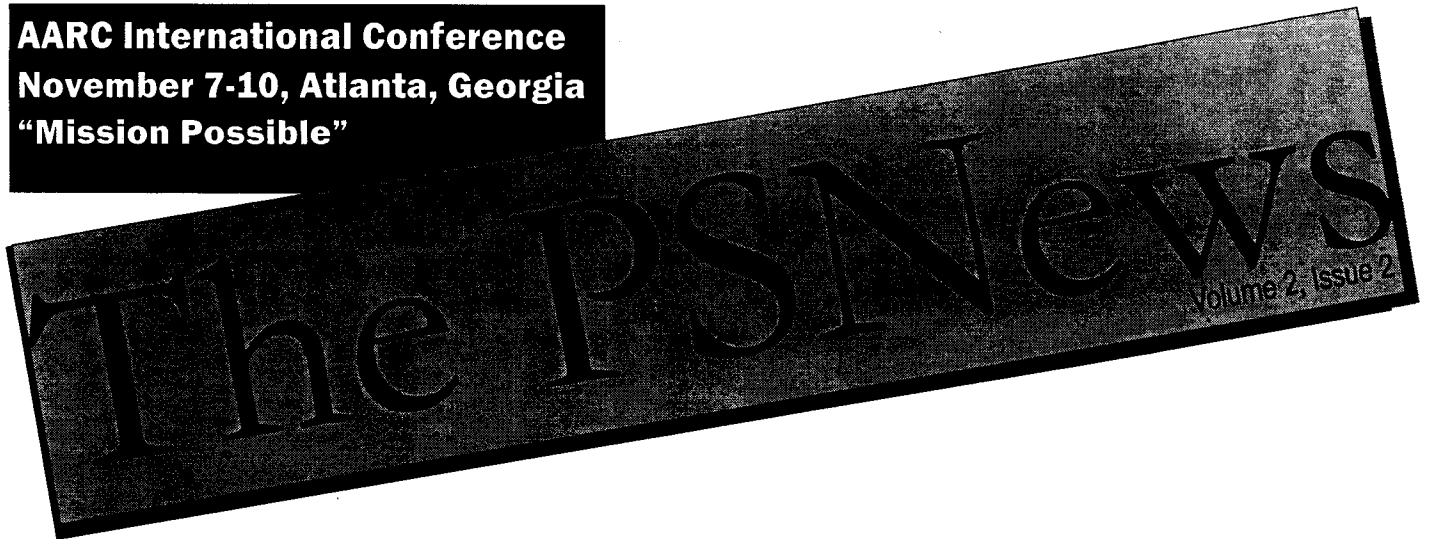


**AARC International Conference  
November 7-10, Atlanta, Georgia  
"Mission Possible"**



## President's Message by Kathy Yandle

**R**ecently, the NBRC Board of Trustees unanimously voted to drop the Certified Respiratory Therapy Technician designation and replace it with a *Certified Respiratory Therapist* designation. As of July 1, 1999, the CRTT credential vaporizes, and all practitioners holding the former credential will become CRTs (and may request a reprinted certificate from the NBRC, if desired.)

### What's in a Name?

The dictionary defines a therapist as, "...one who is skilled in a particular branch of medicine that deals with the treatment and the cure of diseases." This definition is definitely broader than that of a technician, which implies an expertise in the use of machinery or technical equipment.

From an existentialistic viewpoint, if one calls himself a respiratory therapist, does that automatically make him one? Of course, we know that it doesn't, philosophically or legally (at least not in Pennsylvania.)

Over the years, different Respiratory Care Practitioners (RCPs) have been exposed to variations in training, and may possess different clinical abilities. However, there is no question that by virtue of training and experience, RCPs, CRTTs and RRTs alike, are equipped to assess the pulmonary status of patients. They are also clinically suited to utilize patient cues and data, to deliver therapies that improve patient outcome. Dealing with the treatment and cure of disease in pulmonary medicine, I think that most RCPs have been doing the jobs of therapists for quite some time already.

Keeping this foundation in mind, RCPs will most likely continue to experience change as the future of health care progresses. According to John Hughes, PSRC Parliamentarian and Past President, speakers at the AARC Summer Forum portrayed the RCP of the future as one who will operate under medical direction in the form of guidelines and protocols. They will incorporate independent assessment and judgment in their decision-making.

Functioning as physician extenders, future RCPs will incorporate resources and care plans to assure that the patient moves smoothly through the health care system.

The next generation of RCP will serve as disease managers to reduce and eliminate inappropriate respiratory care procedures. They will initiate and modify therapeutic interventions to optimize a patient's transition to health. Able to assess, modify, and report costs associated with patient care, future RCPs will visualize a global picture of the patient as well as the health care system.

Performing as therapists, I believe that RCPs will remain indispensable at the patient bedside as long as their hands are guided by their minds. Manual dexterity will not be enough to sustain jobs. Employers and patients will want and deserve more value for their money. RCPs will deliver the care that the health care system of the future requires, considering the care provided is consistently high in quality, patient-effective, and cost-effective.

Our parent organizations tell us  
*(Continued on page 2)*

# President's Message, continued

(Continued from page 1)

that respiratory care departments and individual RCPs who hope to enjoy professional prosperity in the future, need to make a deliberate transition from task performance, to a more consult-based orientation. In other words, RCPs will have to apply their skills to each individual patient case, rather than perform procedures for the sake of task completion. Hmmm, this is a job for a therapist.

"There is a solid and unified will among those who constitute the core of respiratory care in the U.S. to move our profession forward in a clearly defined direction," reported Mr. Hughes, after attending the Summer Forum. The AARC, NBRC and CoARC are working feverishly for the betterment of the respiratory care profession. Dropping the technician designation, and changing it to therapist, is just one way to send the message that *all RCPs* are ready, willing and able to provide indispensable care for patients and value to the health care team.

After considering the forward thrust of our national organizations, the PSRC Board of Directors, at a recent board meeting, discussed ways to help keep Pennsylvania's RCPs on a similar for-

ward path. The PSRC Board of Directors decided to invest serious time and energy into exploring the feasibility of introducing continuing education units (CEUs) into the respiratory care practice acts. The Board is taking special precautions to consider a wide variety of educational opportunities in which CEUs could be obtained. With the intent to insure safe and quality patient care, the PSRC Board is speculating that the addition of CEUs may also function as a professional enhancement.

Other PSRC initiatives include the Travelling Seminars, which offer topics designed to strengthen the attendees' patient assessment skills. Also, planning for next year's East and West Regional Seminars has already begun. These educational forums will provide RCPs with topics and speakers that will help prepare them for the future.

As always your comments, concerns and questions are, not only welcomed, but also strongly recommended. Please contact any PSRC Board Member to express your feelings or to find out how you can get more involved.

## The PSNews

*The PSNews* is the official newsletter of the Pennsylvania Society for Respiratory Care, Inc., an affiliate of the American Association of Respiratory Care.

**Editor:** Lori Mitchell

### **Editorial Policy**

*The PSNews* will accept all manuscripts for review. Articles published in the newsletter become the sole property of the Pennsylvania Society for Respiratory Care. Opinions expressed by the authors are not necessarily those of the editor of *The PSNews*, the Pennsylvania Society for Respiratory Care (PSRC) or the American Association for Respiratory Care (AARC). The editor reserves the right to edit for clarity and space requirements. Publication of commercial advertisements appearing in *The PSNews* does not constitute an endorsement of products or services.

All submissions should be forwarded to and inquiries for advertising rates should be directed to: Lori Mitchell, Respiratory Services, Holy Spirit Hospital, 503 North 21<sup>st</sup> Street, Camp Hill, Pennsylvania, 17011.

"There is a solid and unified will among those who constitute the core of respiratory care in the U.S. to move our profession forward in a clearly defined direction."

-John Hughes, RRT  
Parliamentarian,  
Past President,  
PSRC

# Johnstown Area Loses Two Respiratory Care Pioneers

by Kathy Yandle

**Eugene E. "Butch" Friedman, CRTT, CPFT**, was a pillar of the respiratory care community, sharing his optimism and leadership with his co-workers. But on July 24, 1998, this beloved leader and friend to many, died while undergoing a chemotherapy treatment for lymphoma. Receiving respiratory care training in the US Navy, Eugene also served in the Vietnam War. Most recently, Eugene worked as a manager of the respiratory care department at Good Samaritan Medical Center in Johnstown, Pennsylvania. Investing more than 30 years in the respiratory care profession, Eugene is deeply missed.

In an unrelated turn of tragedy, **Dr. George D. Hanzel** died on August 19, 1998. Dr. Hanzel was the medical director of respiratory care services at Good Samaritan Hospital and Memorial Medical Center. In addition, he was medical director of the respiratory service and pulmonary laboratory in the intensive care unit at Lee Hospital.

Dr. Hanzel was a noted humanitarian, a devout educator, and a supportive leader for the respiratory care practitioners who worked with him on a daily basis. He was instrumental in bringing the first respiratory care program to the Johnstown area, establishing it as a state of the art

operation. He founded the sleep disorder center at Good Samaritan Hospital and was a leader in the pulmonary rehabilitation program.

With an intense interest in medical ethics, Dr. Hanzel chaired the Ethics Committees at all three hospitals, and served as chairman of the Medical Education Committee for the Cambria-Somerset Council for Education of Health Care Professionals, Inc. Among his teaching credits, Dr. Hanzel served as a clinical instructor in community medicine at University of Pittsburgh since 1967.

## Election Results Are In!

by Lori Mitchell

**T**he PSRC would like to thank every member who participated in the recent election. The results of the election are listed below. These individuals will sit on the 1999 PSRC Board of Directors.

Don't forget to congratulate the winners when you see them!

### President-Elect

Pat Modafferi

### Southeast District Director

Douglas C. Albright

### Vice President

Yvonne Robbins

### South Central District Director

Jerry Pavloski

### Southwest District Director

Deborah A. Logan

### Alternate Delegate

Bradley Leidich

### East District Director

Christopher T. Pekurney

### Medical Advisor

David S. Prince, M.D.

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## From the Editor

**I**n November 1995, I took on the challenge and responsibility of the newsletter for the PSRC, *The PSNews*. And a challenge it has been!

Well, at this time, it is necessary to hand over the reins to someone else as I place my attention to other aspects of my life.

I appreciate having had the opportunity to work on the newsletter and

with the PSRC Board to provide our constituents with "news they could use".

I would now like to introduce to you, Anne Cusano, BS, RRT, CPFT. Anne has volunteered to take the newsletter to the next level. She is presently the Instructor & Laboratory Director of the Respiratory Care Program at Gwynedd Mercy College and has been with the college for ten years. Anne graduated from Miami-Dade Community College in Miami, Florida with an associate's degree in Respiratory Care in 1973. Over the years she has specialized in critical care, pulmonary function testing, and education. Anne states "I love the respiratory care profession and all it stands for. I am looking forward to giving something back to the profession that has given so much to me. *The PSNews* is a wonderful way to keep the lines of communication and information open to the RCP's of Pennsylvania. I am very excited about bringing *The PS News* into the future of respiratory care when the torch is passed on to me."

# DELEGATES REPORT FOR JULY HOUSE OF DELEGATES MEETING, 1998

NAPLES, FLORIDA by Yvonne Jo Robbins

## Vote Totals

At this meeting the PSRC had 1,238 votes based on our membership, placing us number 6 in the country behind Florida, California, Ohio, Texas and New York, respectively. There were no poll votes.

## Resolutions

The following resolutions were introduced at the meeting:

Temp 01. Resolved that the AARC develop a program leading to certification as an Asthma educator. Sponsored by New York. This resolution passed and was referred to the Board of Directors.

Temp 02. Resolved that the President of the NBRC and the Chair of CoArc address the summer HOD meeting as well as the fall HOD meeting. Sponsored by New York. This resolution passed and was referred to the Board of directors.

Temp 03. Resolved that the AARC request that all sponsors which have submitted letters of support revise them to include the importance of having RC departments managed by RCP's. Sponsored by New York. This resolution was defeated.

## AARC Executive Director Report

Sam's report centered around his opinion that what we do as a profession in the next 5 years will determine the direction our profession will take. He believes this is an extremely crucial time. HCFA believes that RC duties can be done by others. (RC is redundant)

The AARC has commissioned a study using a consultant to document cost in providing respiratory care. The belief is that enough costs have not been built into the reimbursement system.

He outlined the following strategy and tactics to be used by the AARC:

## AARC Strategy

1. Provide evidence
  - a. education
  - a. competency
  - a. credible 3<sup>rd</sup> parties
2. Develop an aggressive and comprehensive plan
  - a. avoid attacking others
  - a. include consumers, physicians, RN's. Suggests using consumer groups at the local level.
3. Use outcomes data
  - a. disease management
  - a. protocols
  - a. pt. Education
  - a. utilization
4. Engage consultants
  - a. Lewin study
  - b. Muse study

## AARC Tactics

1. Form coalitions (Baltimore group; formed to develop SNF comments, will develop public relations effort.)
  2. Develop information
    1. Develop partnerships
    1. Consider legal remedies
    1. Message for state societies
      - a. Are we united?
      - a. Do we have the same message?
      - a. Walk the walk
      - a. Prioritize resources
      - a. Communication, timely and effective
      - a. What's the plan?
      - a. Think national, act locally
      - a. Leadership continuity.
- Time For:
- Professionalism
  - Commitment
  - Teamwork

## Government Affairs

Cheryl West reported on a number of issues including PPS for Skilled Nursing Facilities and Hospital outpatient perspective payment system. The AARC has been providing feedback to HCFA on PPS. Expect to receive communication from the AARC asking for letters to be written to senators

regarding the fact that the American Healthcare Association has determined that dollars for non therapy ancillaries (RCP's) has been calculated incorrectly. They will ask that non therapy ancillaries be a pass through.

Medicare has restructured the outpatient reimbursement system with a perspective payment system. This will cover outpatient pulmonary rehab programs. Rehab will be billed and reimbursed as a program. Local intermediaries can adopt this new policy or develop their own.

Cheryl asked for feedback on any local intermediary policy changes or decisions. These are not issued nationally and unless affiliates communicate these, she and the AARC may not be aware of them. She reported that in several states LMP had focused on RC.

She also handed out the Power Point presentation of the Teleconference on Perspective Payment recently put on by the AARC. I have a copy, just give me a call.

## State Government Affairs

Pennsylvania was mentioned in Jill Eichers report as one of three states confronted with issues revolving around licensure and Polysomnography. Jill pointed out that all state laws regulating respiratory care are non-exclusionary and allow other qualified individuals to perform respiratory care duties that fall within their scopes of practice. "In a letter to the American Society of Electroneurodiagnostic Technologists, Inc. the AARC recommended that ASET's members petition state boards for respiratory care for an exemption with documented evidence of appropriate education, clinical training, and competency testing."

## Chartered Affiliate Committee

The committee reported that 12 applications for affiliate of the year were received. PA was one of these. We documented significant activity, but

*(Continued on page 5)*

# DELEGATES REPORT FOR JULY HOUSE OF DELEGATES MEETING, 1998 NAPLES, FLORIDA

(Continued from page 4)

did not have input from all districts. We all need to keep this in our thoughts as we move into the next year and gather points as we go. Continue to send any activity, especially RC Week activities to me. We need to raise awareness of this activity again. Based on the applicants the committee recommended that three categories be established. Small affiliate (0-250), medium affiliate (250-600), and large affiliate (600 and above). This recommendation was approved by the HOD. The winners will be announced prior to the International Conference. Based on this breakdown, PA will fall within the large affiliate category.

## HOD/BOD Joint Session

In joint session, the rates and volumes were approved for the 1999 budget year. These form the basis for final preparation of the budget.

Cindy Molle, AARC president presented a report on the Blue Ribbon Panel on Recognition. Of special note to the PSRC is that two Pennsylvanians are on the panel; Cathy Fresca, from Pittsburgh and Melissa Weiner, who is a therapist for the South Hills Home Health Agency. The panel has identified the following issues which effect recognition: 1. Use of substitute providers, 2. Under appreciation of cost effectiveness of therapists, 3. Nation wide preoccupation with fraud and abuse, 4. Paucity of definitive RC outcome studies, 5. Dismemberment of traditional fee for service paradigm. The panel is recommending the following strategies: 1. Provide evidence of uniqueness (objective, data driven and delineate required competencies), 2. Avoid exclusionary tactics, 3. Create strategic alliances, 4. Promote professional responsibility, 5. Promulgate outcome data, 6. Legal remedies (last effort only).

In a tedious two day session, the

groups worked together using a consensus format to go through each by-law change, alter, and eventually approve the proposed changes. Therefore, both the HOD and the BOD voted at the same time to approve the changes. This saved a lot of back and forth movement of the changes and facilitated rapid approval. This means that the changes needed to move ahead with the AARC restructuring plan have been approved for a first reading. A second reading and approval process will take place at the Fall HOD meeting. Questions about restructuring and what it means to us may be directed to me.

**What we do as a profession in the next 5 years will determine the direction our profession will take...**

- Sam Giordano, Executive Director,  
AARC

## Membership and Public Relations Committee

This committee has developed a professionalism packet which will be available from the AARC web site as a Power Point presentation with a hard copy narrative. It is appropriate to use with many different groups. Basically, it reviews what it means to be a professional. This would be excellent to use for RC students. The new membership categories are available as options now when renewing membership.

## International Respiratory Care Committee

Because of financial constraints, the AARC can sponsor only five International Fellows this year. PA's application was rejected.

## Update by Sherry Milligan

Sherry reported that the AARC web site has 14,000 unique users/month or approximately one million "hits". The most used areas are the member

helpline and job listings. A new area is called "Get the Scoop" and is a list of AARC press coverage. A PR/ media kit is available on the web site as are legislative alerts.

As part of a new membership campaign, Mission Possible is on the site and is downloadable as a slide presentation. As an incentive, anyone who recruits a new member will have their name entered in a drawing to win registration and air travel to the next conference.

## Open Mike Session

This was a session I will remember for the rest of my life!! This a forum for Delegates to share ideas, concerns, etc. As the last speaker of the session stood up I had no idea what was to come, even though it was Bob Lamme, the Alternate Delegate from Ohio. He began by telling everyone how much he enjoyed the HOD and that this would probably be his last session...nothing dramatic there. When he began to explain how he had met someone in the House who profoundly effected his life, I began to get tachy. I won't recount everything that he said, but the last words were: "Yvonne (that's me!!), I have a question for you. I love you with every fiber of my being. I want to walk down life's path with you through good times and bad. Will you marry me?" Next thing I knew he was slipping a ring on my finger and giving me a big kiss. Everyone was clapping and there wasn't a dry eye in the place. Pretty awesome, yes?

I have gained many things in terms of my profession from the HOD; I never expected to gain a fiancée! Oh yes! The PSRC will be gaining a new member....from Ohio! There was one more report after this event but, I'm sorry, I can't remember one word that Dr. Martin Sheridan from BOMA said other than, "I can't believe what I just witnessed!"

Thank you for the opportunity to serve as Pennsylvania's Delegate to the AARC HOD.



# 1998 Literary Awards Winner Selected

by Kathy Yandle

**T**he Pennsylvania Society for Respiratory Care promotes academic and professional achievement by recognizing people who exhibit literary accomplishment through our Literary Awards Competition. The 1998 PSRC Literary Award went to **Marnie Lisa Cerino** of Lancaster. Prizes include a check for \$250.00 and a complimentary renewal of her next AARC membership.

Eric Bakow, former Director of Respiratory Care at the University of Pittsburgh Medical Center, an accomplished author and researcher himself, chaired the 1998 Literary Awards Committee. Other referees included: Edgar Delgado, BS, RRT, Education, Quality and Research Coordinator, Respiratory Care Department, University of Pittsburgh Medical Center, and Frederick J. Tasota, RN, MSN, Research Associate and Director of the Transtracheal Assist Project, School of Nursing, University of Pittsburgh.

The competition, held in June, offered three categories for manuscript submission: Review articles, case reports, and clinical research reports. Curiously enough, all entries were in the review article category. The referees were double-blinded to the identity of the authors. Following established guidelines, they chose one paper as an outstanding entry.

The following is the abstract from Ms. Cerino's award winning paper entitled "Smoke Inhalation Injuries":

"The fire environment exposes victims to intense heat as well as a variety of toxic chemicals. The patient who has suffered a toxic or thermal inhalation injury may present with a wide range of signs and symptoms. While injuries caused by heat are limited to the upper airways, inhalation of toxic chemicals can cause injury throughout the respiratory tract.

Smoke inhalation injuries develop in three phases; early, intermediate, and late. Diagnosis of inhalation injuries is done by physical examination of the victim, blood gas analysis with CO oximetry, bronchoscopy is sometimes used to determine the extent of pulmonary damage, and spirometry is useful in evaluating lung function. Treatment includes oxygen, hyperbaric therapy for severe carbon monoxide poisoning, cyanide antidotes, intubation, mechanical ventilation, chest physical therapy, and aerosolized medications such as bronchodilators."

Again, the PSRC congratulates Marnie Lisa Cerino for writing an outstanding paper and for winning the 1998 PSRC Literary Award. We are proud to claim her as a PSRC member, and as someone who exhibits literary aptitude in the respiratory care profession.

## The PSRC Takes Runner-Up in Summit Award Competition

by Kathy Yandle

**I**n a letter from Jay Wildt, Chair of the AARC Chartered Affiliates Committee, the PSRC was notified of its placement in the prestigious Summit Award competition. Mr. Wildt's letter read:

*"Congratulations! Because of your hard work and outstanding pursuit of quality, I am pleased to notify you that the PSRC is the recipient of the 1998 Summit Award - Runner Up. This award is representative of the chartered affiliate that has documented great effort and diligence toward excellence."*

*"Your efforts are indeed recognized and stand alone as the pinnacle of success. The award itself will be given during the Annual Business Meeting at the International Congress in Atlanta. Again, congratulations on behalf of the American Association for Respiratory*

*Care and the Chartered Affiliates Committee. I look forward to seeing you at the meeting."*

The 1998 Summit Award, established by the AARC, was intended to be given to the state affiliate that demonstrated the most professional activity from July 1, 1997, through June 30, 1998. The Ohio Society for Respiratory Care took the first honors. However, the PSRC was the only affiliate selected as a runner up.

The competition will resume next year, so be prepared to submit your activity that occurred from July 1998, through June 1999. In order to qualify for this award, the PSRC has to demonstrate activity by its Board of Directors, such as holding regular meetings and conducting seminars. But, more importantly, individual respiratory care practitioners have to demonstrate the most activity towards

the advancement of the respiratory care profession by promoting respiratory health or the respiratory care profession, in general.

Accepting this year's award, Pennsylvania's RCPs have the opportunity to take credit for the hard work that they did throughout this last year. The award is a statewide honor. The Summit Award is an award for the PSRC membership at large. A hearty thanks to everyone who submitted their activities to Summit Award Chairperson, Vonnie Robbins. The PSRC would like to commend Ms. Robbins for organizing and assembling the massive amount of documentation of activity that she received, enabling the PSRC to be recognized in this manner.

Congratulations, PSRC members and supporters!

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# PSRC-Talk Undergoes Changes

by Steve Febrarro

**T**he PSRC-Talk mailing list is undergoing some technical changes. Improvements will allow you easier usage and expanded capabilities.

For example, now you can, **access the mailing list via the web, send messages from the web, subscribe and unsubscribe and adjust your own settings.**

Here's the instructions to access the PSRC-Talk list via the web.

1. Point your browser to: <http://hub.xc.org/Scripts/lyris.pl?enter=psrc-talk>
2. This will take you to the psrc-talk list login page.
3. The first thing you will see are two slots where you can enter your e-mail address and password. Ignore these two slots for now. I have not assigned anyone on the list a password, but you all have been assigned random passwords by Lyris.
4. Ignore the section which says, "If you are not member of psrc-talk..."
5. In the "Did you forget your password?" section, type in your e-mail address and hit the "get password" button. I realize you didn't forget your password, since you never had one in the first place, but this is a necessary step.
6. In a few minutes you should receive an e-mail with your password (which you can change later) to the psrc-talk list.
7. Go back to: <http://hub.xc.org/Scripts/lyris.pl?enter=psrc-talk>, and enter your e-mail address and the password you received in the mail. This will take you to the psrc-talk list web page.

NOTE: You cannot go directly to the psrc-talk list web page. For now, you must enter through the log in page. (There will be plans to change that in the future.)

8. If you have followed steps #1 thru #7, you should be at the psrc-talk web page.

9. You should see four buttons: Read Messages, Create a New Message, Your Settings, Leave (unsubscribe).

10. To look at the "Your Settings" page, click on the "Your Settings" button.

11. There are a couple of things you can do here to personalize the way you are identified and the way you receive mail. The first thing you may want to do is to change your password. You will need this password to each time you log on, so make it something simple to remember. If you do forget, you can always click on the "forgot password" button on the login page and have it mailed to you.

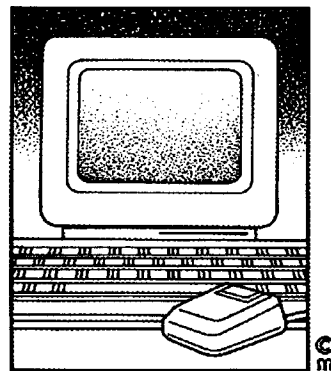
12. The "Status" section determines how and when you will receive mail from the list. The "nomail" feature is great to use when you go on vacation, or are away for a few days. In the past you would have to unsubscribe from the list, then resubscribe. Now, just change your setting to "nomail." Then, when you come back, switch it back to "receive messages."

13. You can choose to see your own messages when you post to the list.

14. If you don't want to see your own message, but want to make sure your message was posted to the list, you can use the "Acknowledgement" option.

Well, that's the web interface for the mailing list. I'll post the e-mail commands to Lyris in the next day or two.

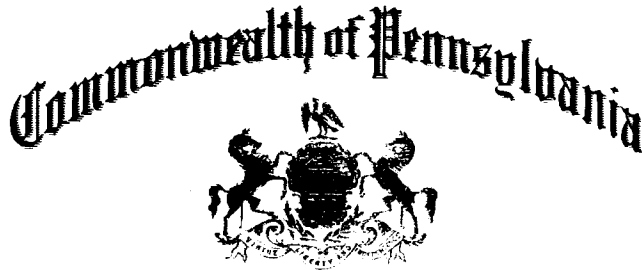
Please visit our website: <http://www.vessel.org/psrc/>  
If you have any problems, please notify me via the PSRC website. And, let's get PSRC-Talk working for you!!!



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# The Governor Issues Proclamation

Governor Tom Ridge issued a proclamation in honor of the hardworking RCP's in Pennsylvania and Respiratory Care Week which occurred in October from the 4th until the 8th.



## Governor's Office

### PROCLAMATION

#### **RESPIRATORY CARE WEEK**

*October 4 - 10, 1998*

*WHEREAS, More than 18 million Americans suffer from respiratory ailments and rely upon the services of respiratory professionals for care; and*

*WHEREAS, the Pennsylvania Society for Respiratory Care represents nearly 6,200 respiratory care professionals throughout Pennsylvania who play a vital role in the treatment of patients with respiratory problems; and*

*WHEREAS, these dedicated professionals specialize in the treatment of disorders such as emphysema, asthma, chronic bronchitis, cardiac arrest, cystic fibrosis, croup, and drowning. In addition, respiratory care practitioners are members of the response teams that answer patient emergencies in hospitals. Using sophisticated life support systems, respiratory care professionals provide essential care and assistance following many surgical procedures. They also save or extend the life of their patients by using oxygen therapy, respiratory drugs, pulmonary hygiene, and cardiopulmonary resuscitation techniques.*

*THEREFORE, In special recognition of the important role that respiratory care professionals play in providing quality health care to their patients, I, Tom Ridge, Governor of the Commonwealth of Pennsylvania, do hereby proclaim October 4 - 10, 1998, as RESPIRATORY CARE WEEK in Pennsylvania. I encourage all citizens to recognize the invaluable services provided by these health care professionals.*



*GIVEN under my hand and the Seal of the Governor, at the City of Harrisburg, this thirty-first day of August in the year of our Lord one thousand nine hundred and ninety-eight, and of the Commonwealth the two hundred and twenty-third.*

A handwritten signature in black ink that reads "Tom Ridge".

**TOM RIDGE**  
Governor

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# 1998 PSRC Officer

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## **Audit Committee Chair**

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## **Seminar Committee Chair**

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## **Sputum Bowl Committee Chair**

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## **PSRC Web Site**

<http://www.vessel.org/psrc/>

## **PSRC-TALK**

[Psrc-talkXC.Org](http://Psrc-talkXC.Org)

## **American Association for Respiratory Care**

[www.aarc.org](http://www.aarc.org)

## **National Board for Respiratory Care**

[www.nbrc.org](http://www.nbrc.org)

## **American Lung Association**

[www.lungusa.org](http://www.lungusa.org)

## **Joint Commission on Accreditation of Healthcare Organizations**

[www.jcaho.org](http://www.jcaho.org)

## **Virtual Hospital**

[www.vh.org](http://www.vh.org)

## **Lung Sounds**

[www.RALE.com](http://www.RALE.com)

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## Calendar of Events 1998-1999

### November

**7-10 AARC International Congress,  
Atlanta Georgia**

### December

**10 4th Quarter PSRC Board of  
Directors Meeting, 1998 Annual  
Business Meeting, and 1999  
Orientation Meeting at  
Harrisburg Area Community  
College. Contact: Any PSRC Board  
Member for more information.**

### April 1999

**13, 14 "Great Expectations: Soaring to  
New Heights"- PSRC East Regional  
Conference and Exhibit, entitled  
Held at the Holiday Inn, King of  
Prussia. Contact: Angie Herstine  
(609)784-0340.**

## HACC Students Win Awards

**V**icki Kotsalos, CRTT (Respiratory Therapist Program '97) received the Pennsylvania Society for Respiratory Care student recognition award. Award recipients receive an AARC membership renewal and have their names displayed on a plaque located in the College.

**C**hristy King, CRTT (Respiratory Therapist Program '97) received the American Home-Patient clinical recognition award for excellence in the clinical phase of the curriculum. Award recipients receive a \$100.00 cash award and have their names displayed on a plaque located in the College.

**J**enette Peachey, CRTT (Respiratory Therapist Program '97) received the American HomePatient academic recognition award for excellence in the academic phase of the curriculum. Award recipients receive a \$100.00 cash award and have their names displayed on a plaque located in the College.