



2012 Application for Admission
for students seeking entrance into the sophomore year of the
Respiratory Care BS Degree Program
(Applications are due on May 1, 2012)

Application Procedure

Selection Information:

To be eligible for admission into the Respiratory Care Program you must have a minimum GPA of 2.75 and the following minimum eligibility requirements must be met:

1. You must submit an Application for Admission to the Oregon Institute of Technology Admissions Office. **Admission to OIT is independent of admission to the Respiratory Care Program.** An OIT Application for Admission may be obtained online at www.oit.edu/admissions. Applicants who are admitted to OIT will be classified initially as "pre-respiratory care" majors until such time as they are accepted into the Respiratory Care Program.
2. You must have successfully completed or be in the process of completing all freshman pre-respiratory care courses found in the OIT general catalog.
3. Successful candidates must pass a criminal history report done at your own expense. A history of certain crimes will prevent you from entering or progressing in the program or clinical experience. Licensing boards require a clear criminal history and other qualifications the applicant is responsible to know.
4. The absence of a tobacco sent is required to verify that you are a nonsmoker.
5. Applicants from previous respiratory therapy, nursing and allied health programs must not have been expelled from the professional curriculum or obtained a failing grade.
6. Schedule an interview and dexterity test with one or more members of the admissions committee.
7. Take an examination over elements of Anatomy and Physiology.
8. Submit a take-home-open-book technical paper on an assigned topic.

RESPIRATORY CARE PROGRAM ADMISSION PROCEDURES

To be considered for admission to the Respiratory Care Program, you must meet minimum admission eligibility and submit a complete application package to the Respiratory Care Program. Early application is encouraged. **All application materials for fall 2012 should be received no later than May 1, 2012.** Mail these materials to:

Respiratory Care Program DOW Hall • Oregon Institute of Technology • 3201 Campus Drive • Klamath Falls, OR 97601

Official transcripts from every college or university you have attended, are currently attending or from which you will receive credit must be sent directly to the Respiratory Care Program at the above address. (Failure to list all institutions attended may result in denial of admission or in disciplinary action.) Note that you also will need to have official transcripts sent to the OIT Admissions Office in order to complete the institutional application process.

Applicant rating system:

Applicants will be ranked using a rubric by the qualities reflected in previous grades and transcripts, by the criminal background check, by how fully the applicant can follow and comply with the application directions, by applicant interview and noninvasive COHB and olfactory evidence of nonsmoking status. The rubric is found on page 9.

The following must be included in your application package:

1. Respiratory Care Program Application for Admission.

2. Signed consent for physical assessment and arterial blood gas draw.
3. Check or money order payable to Oregon Institute of Technology RCP for \$40. (Note that this non-refundable application fee is separate from the application fee that accompanies the OIT institutional application.)

Admission to the Respiratory Care Program requires completion of other steps. These steps include submission of recent immunization records, a health history, a record of current basic life support certification and, a criminal background check, drug screen and applicant interview. Admitted applicants must comply with these requirements and attend program orientation.

Oregon Institute of Technology
Respiratory Care Program Dow Hall
Oregon Institute of Technology
3201 Campus Drive
Klamath Falls, OR 97601-8801

**APPLICATION FOR ADMISSION
TO RESPIRATORY CARE PROGRAM
FALL 2012**

Please type or print neatly.

This application should be received by the RCP Program by May 1, 2012. Please include a nonrefundable \$40 check for program application payable to Oregon Institute of Technology RCP.

Social Security Number _____ OIT Student ID Number _____

Legal Name *Last* _____ *First* _____ *Middle* _____

Other name(s) that may appear on your academic records _____

Preferred First Name _____

Mailing Address _____
Number & Street City State Zip Code

Permanent Address (if different than above)

Number & Street City State Zip Code

Home Telephone (____) ____ - _____ Work Telephone (____) ____ - _____ E-mail _____

Do you currently use tobacco products? Yes No

Have you applied to the OIT program previously? _____

I have read the Essential Functions (page 6) and believe that I am fully capable to perform the physical and cognitive functions of the respiratory care profession.

Signature

Date

EDUCATION INFORMATION

List every college or university you have attended or are currently attending in which you have or will receive credit (including OIT). Have **official** academic transcripts from each school sent directly to the OIT Admissions Office as well as enclosing a copy with your application. **(Failure to list all institutions attended may result in denial of admission or in disciplinary action.)** List them in the order they were attended. Attach additional pages if necessary.)

Name of College or University	Location	Dates of Attendance	Degree Earned/ Anticipated
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I agree to follow and abide by the application procedure outlined in this packet. I understand that a selection committee consisting of representatives from Respiratory Care and other college employees may review my application.

I understand that if I am not accepted to the term for which I am applying, or if I do not enroll for the term to which I am accepted, I will need to re-apply for admission.

To be accepted into the program, I understand that I must obtain:

Health Requirements

The following health requirements must be fulfilled before registration in the Respiratory Care Program. Documentation that the requirements have been met must be submitted to the OIT Integrated Student Health Center. Failure to complete these requirements will result in a "Health Hold" on the student's account at the Business Office and on registration for the following term.

1. A completed health history form that includes a completed Tuberculosis Risk Assessment. This form is mailed to all students when they confirm registration. You must also document two (2) TB tests within the last year.
2. Evidence of adequate immunizations (e.g., official immunization record, signed statement by a physician, immunizations on official high school transcript, etc.)
 - Adacel or Diphtheria-tetanus booster within the last ten (10) years.
 - Two doses of measles/mumps/rubella vaccine (MMR) are required by Oregon Law (ORS 433.282) for all full-time college students born on or after January 1, 1957. The first dose must be given after the first birthday. The second dose must be after 1989.
 - Certification of initiation of Hepatitis B immunization
 - Varicella (chickenpox) vaccination
 - Hepatitis A & meningococcal vaccines are strongly recommended

The student must have an American Heart Association Health Care Provider CPR card (adult, child, infant, 1 and 2 person) that is current throughout the program. Arrangements for the required annual renewals are the responsibility of the student, and a copy of the current card must be submitted to the respiratory care secretary for placement in the student's file. A 30-day grace period will be allowed after a card expires. However, after that time a student cannot practice in the clinical setting without a current CPR card and the student's program standing may be jeopardized if renewal does not occur within the required time frame.

I understand that if I am accepted into the program, I will be expected, with or without accommodation, to demonstrate the essential functions of Respiratory Care (page 6) in the classroom and the clinical settings (as reflected in objectives and evaluation tools) to successfully complete the program. Once accepted into the respiratory care program, one's program status may be lost should the student engage in cheating, fraud or perform unacceptably in program coursework or clinical. I understand that program status will be governed by the policies and regulations provided in the respiratory care student handbook in force at the time of program admission. I further understand that additional immunizations, criminal background checks and drug screens are likely when entering the clinical phase of the program.

Signature of applicant

Date

Upon completion of the Respiratory Care program, applicants for licensure are asked the following questions by the Respiratory Therapy Licensing Board: (1) Has any state licensing board refused to issue or renew, or denied you a license to practice respiratory care? (2) Have you ever been convicted of a crime? (3) Have any charges of malpractice been brought against you? (4) Do you currently have, or have you had within the past five years, a dependence on the use of alcohol or drugs which impaired or does impair your ability to practice respiratory care safely and competently? (5) Within the past five years, have you been engaged in the excessive or habitual use of alcohol or illegal drugs, or received any inpatient therapy/ treatment or been hospitalized for alcoholism, or illegal drug use, or been arrested for a DUII (driving under the influence of intoxicants) or DWI (driving while intoxicated)? Your answer to these questions may determine the granting of a license to practice respiratory therapy.

The following courses must be completed prior to entering the Respiratory Care Program. You must **provide academic transcripts** indicating the grade, term and year you completed or will complete these courses, use "In progress" to indicate courses in which you are currently enrolled. Write the quarter, year, grade and institution in the table below.

Course Number	Course Name	Credits	Year and Term taken	Actual name and number of course taken	Grade	College
BIO 231	Human Anatomy and Physiology I	4				
BIO 232	Human Anatomy and Physiology II	4				
BIO 233	Human Anatomy and Physiology III	4				
BIO 200	Medical Terminology	2				
CHE 101/104	Elementary Chemistry and Lab	4				
MATH 111 or MATH 243	College Algebra or Introductory Statistics	4				
PSY	PSY 201, 202 or 203	3				
	Social Science Elective	3				
	Social Science Elective	3				
	Social Science Elective	3				
	Social Science or Math or Science elective	1				
WRI 121	English Composition I	3				
WRI 122	English Composition II	3				
WRI 227	Technical Writing	3				
SPE 111	Fundamentals of Speech	3				
COM 205	Intercultural Communications	3				
	Humanities Elective	3				
	Humanities Elective	3				
	Humanities Elective	3				
	2 years High School Language					HS

I certify that I have provided complete and accurate statements on this application. I understand that if it is found to be otherwise, this is sufficient cause for rejection or dismissal. I authorize the release of any information submitted by me in connection with this application to any person, corporation, association or government agency by OIT only to verify or explain this information. I understand that I will be required to carry Major Medical Insurance or provide documentation of adequate coverage. The respiratory care program requires assignments to be completed every week on the internet. I understand that I must maintain broadband access to the internet and an operating computer with Microsoft Word. Hospitals will require additional criminal background checks and drug screens.

Signature of applicant

Date

Mail your application packet to:

Respiratory Care Dow Hall
Oregon Institute of Technology
3201 Campus Drive
Klamath Falls, OR 97601-8801

PROVISION AND RECEIPT OF RESPIRATORY CARE DIAGNOSTIC PROCEDURES

In the course of the respiratory care curriculum, you may be required to serve as a patient for a fellow student (or faculty member). The primary purpose for the delivery of diagnostic, nontherapeutic, or therapeutic services to students by student colleagues (or faculty) is to provide initial clinical encounters that support the clinician's early skill development.

Respiratory Care students may be required to receive procedures, including, but not limited to, examination of the head, neck and chest; acquisition of ECGs; arterial blood gas draw, vital signs; and pulmonary function testing.

In order for procedures to be provided to you in a safe manner, it is necessary that you complete a current health history. Health history information is to be used for treatment delivery only. Access to student treatment records for purposes other than health care delivery is unauthorized.

A description of procedures as well as the risks and benefits are included in this packet. There may be further risk, given the clinician is a student learning to provide the procedure.

Please read the description of each procedure and the benefits and risks associated with each. If you agree to consent to these procedures, sign the informed consent form and return it with your respiratory care application.

CONSENT FOR PHYSICAL ASSESSMENT AND ARTERIAL BLOOD GAS DRAW

I have read the description of each diagnostic procedure. I understand the purpose of my receiving such care is primarily to provide clinical encounters necessary for skill development of the clinician and secondarily to provide an educational benefit to the student-patient.

I further understand the inherent risks and benefits of each procedure. I further understand the inherent risks and that I must maintain adequate student accident or health insurance to cover the cost of injury. I am responsible for the cost of emergency and other medical treatment.

I also understand it will be necessary for me to provide a current health history to the student and faculty directly involved in the provision of these procedures. I can expect all health history information to be kept confidential.

I understand all of the above and agree to physical assessment, arterial blood gas draw and pulmonary function testing.

Name (print or type)

Signature of applicant

Date

TECHNICAL STANDARDS

I have read the technical standards. I understand that respiratory therapists must be able to recall crucial information rapidly. My memory is such that I can perform this critical function.

Name (print or type)

Signature of applicant

Respiratory Care Essential Functions

In performing his or her duties, a Respiratory Care student and professional:

- Utilizes the application of scientific principles for the identification, prevention, remediation, research and rehabilitation of acute or chronic cardiopulmonary dysfunction, thereby producing optimal health and function.
- Reviews existing data, collects additional data and recommends obtaining data to evaluate the respiratory status of patients, develop the respiratory care plan, and determine the appropriateness of the prescribed therapy.
- Recall crucial information from memory rapidly and rapidly analyze the information in writing.
- Initiates, conducts, and modifies prescribed therapeutic and diagnostic procedures such as: administering medical gases, humidification and aerosols, aerosol medications, postural drainage, bronchopulmonary hygiene, cardiopulmonary resuscitation; providing support services to mechanically ventilated patients; maintaining artificial and natural airways; performing pulmonary function testing, hemodynamic monitoring and other physiologic monitoring; collecting specimens of blood and other materials.
- Documents necessary information in the patient's medical record and on other forms, and communicates that information to members of the health care team.
- Obtains, assembles, calibrates and checks necessary equipment.
- Uses problem solving to identify and correct malfunctions of respiratory care equipment.
- Demonstrates appropriate interpersonal skills to work productively with patients, families, staff and co-workers.
- Accepts directives, maintains confidentially, does not discriminate, and upholds the ethical standards of the profession.

With these considerations in mind, a candidate must be able to meet the following technical standards:

Physical Standards:

		Frequency
LIFT:	up to 50 pounds to assist moving patients.	F
STOOP:	to adjust equipment.	F
KNEEL:	to perform CPR.	
CROUCH:	to locate and plug in electrical equipment.	F
REACH:	5.5% above the floor to attach oxygen devices to wall outlets.	C
HANDLE:	small and large equipment for storing, retrieving, and moving.	C
GRASP:	syringes, laryngoscope and endotracheal tubes.	C
STAND:	for prolonged periods of time (e.g., deliver therapy, check equipment).	C
FEEL:	to palpate pulses; arteries for puncture; skin temperature.	C
PUSH/PULL:	large, wheeled equipment (e.g., mechanical ventilators).	C
WALK:	for extended periods of time to all areas of a hospital.	C
MANIPULATE:	knobs and dials associated with diagnostic/therapeutic devices.	C
HEAR:	verbal directions; gas flow through equipment; alarms; through a stethoscope (e.g., breath or heart sounds).	C
SEE:	patient conditions (e.g., skin color, work of breathing) mist flowing through tubing; shapes and forms associated with radiographs.	F
TALK:	to communicate in English goals/procedures to patients.	C
READ:	typed, handwritten, computer information in English.	C
WRITE:	to communicate in English pertinent information (e.g. patient evaluation data, therapy outcomes).	C

Cognitive/Mental/Attitudinal Standards:

	Frequency
Function safely effectively and calmly under stressful situations.	F
Maintain composure while managing multiple tasks simultaneously.	F
Prioritize multiple tasks.	F
Recall crucial information rapidly and analyze it in writing.	F
Exhibit social skills (e.g., respect, politeness, tact, collaboration, teamwork, discretion) necessary to interact effectively with patients, families, supervisors and co-workers of the same or different cultures.	C
Maintain personal hygiene consistent with close personal contact associated with patient care.	C
Display attitudes/actions consistent with the ethical standards of the profession.	C

C – Constantly

F – Frequently

O - Occasionally

Activities in Which Respiratory Care Students Participate

Arterial Blood Gas Draw

Arterial blood gas (ABG) analysis is an essential diagnostic test used for the clinical assessment of ventilation, acid-base status and oxygenation. The collection of an arterial sample may be done quickly and it provides important information for decision making in the management of the patient requiring oxygen or ventilatory assistance.

The collection of an arterial blood sample is commonly done by arterial puncture.

Arterial puncture is not without hazards and potential complications because it disrupts the integrity of a large high-pressure vessel of the arterial system. Possible complications of arterial puncture at any site are vessel trauma and occlusion, embolization, infection and vessel spasm. If properly done by a skilled practitioner, arterial puncture provides safe, reliable information for patient management.

You will learn how to perform an arterial puncture, and the advantages and disadvantages of each site. You will also learn how to perform arterial sampling and the hazards and complications of the procedure. You will perform an arterial draw procedure on a classmate and experience the same. (White, 2003, page 127)

Physical Assessment of the Chest

Physical assessment of the chest is an important tool employed in patient care. Assessment of the chest includes inspection of the structure of the thorax, observation of patterns of movement during respiration and percussion. Students and faculty will conduct the physical assessment of the chest in laboratory and clinical practice and in a manner that preserves modesty.

Part of the examination will require touching the chest with the student's hands. This is not a breast exam. The touching of the chest wall is to feel for vibrations and is required during auscultation. In addition, students will perform percussion. Percussion is performed by using one finger to strike another finger placed upon the surface of the skin to elicit the resonant sounds of the chest.

Hazards of this examination would be the risk of inappropriate interactions or inappropriate exposure by those performing the examination.

You will learn to perform chest inspection, palpation and percussion on classmates, usually of the same gender. You will also have students perform these physical assessments on yourself. (White, 2003, page 33-46)

Electrocardiogram

The electrocardiogram (EGG) is one of the most important diagnostic tools used in medicine. The information obtained non-invasively from the EGG tells the diagnostician about the electrical activity of the heart. From this information, appropriate treatment can be prescribed to correct some of the abnormalities diagnosed using the EGG.

Because respiratory care involves the diagnosis and treatment of cardiopulmonary disorders, many respiratory care departments routinely perform electrocardiography as a part of their daily responsibilities. It is important that you, as a respiratory care practitioner, understand what an EGG is, how to recognize normal and abnormal EGG rhythms, and how to perform an EGG using an electrocardiograph machine.

As a student in the respiratory care program, you will learn to perform an EGG on a classmate and your classmates will perform one or more electrocardiograms on you. During an EGG, you will need to lie down and electrodes will be attached to your arms, your legs and to six locations across your chest. Students and faculty will work together to insure this procedure is conducted safely and in a manner which preserves modesty and personal dignity. There are few hazards to the EGG procedure. You may experience mild discomfort in the area where the skin is prepared for the electrode. (White, 2003, page 101-114).

Pulmonary Function Testing

The measurement of pulmonary function is an important duty for many respiratory care practitioners. The pulmonary function tests include spirometry, the measurement of lung volumes, airway resistance, compliance, minute ventilation, diffusion capacity, cardiopulmonary stress tests, polysomnography, oximetry and many others. Most of these tests are considered noninvasive, although they include breathing for a period of time through a mouthpiece. Key elements of each test will be summarized below.

Spirometry: During spirometry the subject breathes through a mouthpiece with a nose-clip on the nose. The subject is instructed to take a deep breath in and blast it out. This test must be repeated several times to assure reproducibility and validity.

Body Plethysmography: The body plethysmograph is a closed chamber. The subject sits in this chamber and breathes on a mouthpiece while holding one's hands over the cheeks. Various breathing maneuvers are conducted for about 2 to 5 minutes.

Lung Volume determination: Several other tests are used to determine lung volumes. The subject breathes medical gases through a mouthpiece and other apparatus.

Diffusion Capacity of the Lung: During the diffusion capacity, the subject takes a breath of medical gases, including 0.03% carbon monoxide. This breath is held for 10 seconds and exhaled. The test is typically repeated 3 times.

Cardiopulmonary stress test: During the cardiopulmonary stress test, the subject breathes through a mouthpiece while exercising on a treadmill. The patient has various monitoring equipment attached and incrementally exercises as hard as possible for approximately 10 minutes.

Polysomnography: Electrodes and other sensors are attached to the scalp, arms, legs, foot and chest. This data is collected along with a concurrent videotape while the subject sleeps.

As a student in the respiratory care program, you will be expected to collect data and perform the above mentioned tests and others of a similar nature on classmates, patients and volunteers. Your classmates will also perform tests on you.

Spirometry and other pulmonary function tests are safe procedures; untoward reactions rarely occur. The following have been reported anecdotally: Pneumothorax (collapsed lung); increased intracranial pressure (increased pressure in the head); syncope; dizziness; light-headedness; chest pain; coughing; contraction of infections; oxygen desaturation due to interruption of oxygen therapy; bronchospasm.

Source:

White, G.C. (2003). Basic clinical lab competencies for respiratory care: An integrated approach (Fourth ed.)- Clifton Park, NY: Delmar.

**OIT Respiratory Care Program
Applicant Qualities Rating Rubric for PRC majors**

All applicants must have an overall GPA of 2.75 and initial courses must be included in the GPA calculation

The following rubric will be used by the admissions committee to rank program applicants however scores of 0 and less may be acquired in categories for instance multiple 5 D grades would result in a score of -4 in the Science preparation line. A low score in one category may supersede the importance of the entire score and preclude an applicant from acceptance. For instance an applicant with a significant criminal background record may be excluded from admission even though scores of 4 are obtained in every other category. Therefore the scoring rubric is used to document the areas qualitatively considered not to establish an exact summative threshold for admissions. Usually admission corresponds to high scores.

Quality	1	2	3	4	Score
Academic Preparation (Fraudulent assertions -10)	Will be able to complete all science/Math prerequisites	Plan to complete all prerequisites prior to fall	All prerequisites completed	All prerequisites completed with BS or MS	
Prerequisite grades	One D grade	All A, B and C grades	All A and B grades	All A grades	
Program incompletion	1 incomplete due to health			0 incompletes	
Repeated Course	1 repeated course			No repeated courses	
Technical Paper	Paper demonstrates research and some comprehension	Paper demonstrates substantial comprehension	Excellent paper to WRI 121 standards demonstrates substantial comprehension	Excellent paper to WRI 227 standards with citations demonstrates substantial comprehension	
Application completion (Fraudulent records or assertions -10)	Applicant requires a lot of help completing the application and the related requirements	Completed application, fee, immunizations, health history, Criminal Background Check	Completed application, fee, immunizations, health history, CPR, Criminal Background Check	Completed application, fee, immunizations, health history, CPR, Criminal Background Check, and Drug Screen.	
Interview and Dexterity test – Formal and informal elements and nonsmoking status	Schedules interview	Schedules interview, has command of the English language and culture	Schedules interview, has command of the English language and culture, demonstrates respect and has done homework on respiratory care	Schedules interview, command of English language and culture, respect, knows the profession is professionally dressed, high dexterity, No smell of smoke	
Anatomy and Physiology Test	0-60%	61-70%	71-80%	81-100%	
Lawfulness	No history of GAO or EPLS exclusions or citations on criminal background check. One misdemeanors			No history of GAO or EPLS exclusions or citations on criminal background check. Zero misdemeanors	

OIT Respiratory Care Program Description of Application Process

PURPOSES: The purposes of the application processes are multiple and include elements of applicant assessment as well as the collection of information necessary to assure the safety of the student, patients and others. The process includes instructional and educational elements. The education of the student begins prior to, during and after the application process.

PROCESS: The process involves a decision to investigate the profession, the downloading and completion and submission of the application and fee, the submission of immunization records, CPR records, a drug screen, a criminal background check, the scheduling of the formal applicant interview/tests and the submission of the essay. The student may talk to respiratory therapy students, faculty, college advisors and they may speak to actual clinicians including nurses, physicians and respiratory therapists. They are encouraged to make arrangements to shadow a clinician. It is important that the student conduct themselves and dress to professional standards during this period of time. Any time the applicant contacts a faculty member, respiratory therapy student or secretary during this time that contact is considered part of the informal applicant interview. The impression that the secretary, the faculty, the students have of the contact is considered appropriate data to grade in the applicant interview. Applicant attire during the informal contact should be modest and exclude unusual piercings, tattoos and cleavages. During the formal interview the applicant should follow professional dress code standards.

GRADES and GPA: The respiratory therapy program considers unfavorable a record of D and F grades that are multiple and span the transcript for more than one quarter. A pattern of these grades spanning multiple quarters is a good indication that the student should not submit an application to the program. It may be in contrast to other programs but the student should still not apply to the respiratory care program even if the applicant retook the courses for which they obtained initial D and F grades. The respiratory care program seeks to admit students who reliably earn passing grades the first time and every time. GPA computations are not considered valid for the respiratory therapy application if they exclude initial D and F grades because the course was repeated.

COMPLETING THE APPLICATION: The respiratory therapy program faculty are occupied organizing and conducting classroom, laboratory and clinical instruction. The respiratory care application committee is looking to admit applicants who are able to follow directions and figure things out. The application process is one that tests the applicant's abilities to complete a number of tasks without significant ongoing assistance from the faculty. Applicants who require significant ongoing help to understand and comply with the application process are scored lower than those who do a good job completing all requirements independently. There is a balance to this because it is also important that the applicant follows up on the process once the application is submitted. Applicants are expected to look at the immunizations required and turn in appropriate records. Applicants need to get the healthcare provider CPR certification for infant, child and adult and turn it in. Applicants need to complete the criminal background check, print the results and turn them in. Applicants need to contact a service that will perform the drug screen and send the results.

ESSAY: Once the applicant has submitted the application, transcripts, application fee and other elements they should contact the program to receive the essay assignment. The essay assignment is designed to evaluate the applicant's ongoing ability to research a respiratory care related topic and write a technical paper. When the Essay is complete it should be submitted to the program and a request for the formal interview made.

FORMAL INTERVIEW: The applicant will be given a date, time and location to come for the formal interview. The interviews generally involve only one applicant at a time. During the interview the applicant may be expected to answer questions regarding why they are applying to the respiratory care program. The applicant may expect other questions related to information that they submitted with the application. The interview usually takes place in multiple locations and with multiple questioners. The applicant will be given a dexterity test. The applicant will also be given an examination covering topics related to anatomy and physiology.

DECISIONS REGARDING ADMISSIONS: Because applications are accepted over an extended period of time and because the interviews and tests also occur at different time the program makes ongoing decisions regarding admissions. The decision regarding admissions is a qualifying decision rather than a comparative decision among the full applicant pool. Because the admissions committee has other duties and not all application materials may have been submitted there are not exact dates when decisions are expected for all applicants. The process and notification of acceptance is ongoing. In the past applicants have not been denied because of program capacity. Usually applicants are denied because they have not met the program admission standards.