



The ACRTE Chronicle

American College of Respiratory Therapy Education

October 15, 2026, Volume 3 (10)

Spotlight Article



By Lawrence Stein, MSRT, RRT, RRT-ACCS, RRT-NPS

Director of Clinical Education,
Clinical Assistant Professor

Preparing Respiratory Care Leaders for an Evolving Profession

The University of Kansas Medical Center (UKMC) Department of Respiratory Care and Diagnostic Science continues to advance respiratory care education through innovative academic programs, expanded clinical education, interprofessional collaboration, research, professional engagement, and global health initiatives. The mission of the Respiratory Care program is to educate students to become leaders in clinical practice, teaching, and research while making a positive impact on the advancement of the profession. Students learn within an academic medical center alongside learners and professionals from medicine, nursing, and numerous health professions, providing opportunities for interprofessional education and collaboration throughout their educational experience. Today, the department offers educational pathways for both future and practicing respiratory therapists while continuing to develop new opportunities designed to meet the changing needs of patients, health systems, and the respiratory care profession.

Bachelor of Science in Respiratory Care

KU's on-campus Bachelor of Science in Respiratory Care program combines classroom and laboratory instruction with extensive clinical education throughout the Kansas City metropolitan area. Students gain experience across diverse patient populations and practice settings while developing the clinical judgment, technical skills, communication abilities, and professionalism required for contemporary respiratory care practice.

The program recently completed a comprehensive reaccreditation process with the Commission on Accreditation for Respiratory Care (CoARC). Following its 2025 site visit and subsequent submission of enhanced documentation related to clinical competency assessment, CoARC reaffirmed the program's Continuing Accreditation with no limitations or citations. The next comprehensive site visit is scheduled no later than 2035.

Curricular development has also remained a priority. Advanced respiratory critical care now incorporates additional laboratory experiences designed to strengthen students' preparation for critical care practice. Beginning in 2026, neonatal and pediatric respiratory care are being offered as separate courses, allowing greater attention to each specialty. Faculty are also preparing the curriculum for changes to the National Board for Respiratory Care credentialing examination structure anticipated in 2027, with increased emphasis on clinical judgment and application of knowledge.

Program leadership transitioned in January 2026, with Dr. Chad Condren assuming the role of Program Director and Lawrence Stein assuming the role of Director of Clinical Education. Dr. Lisa Trujillo continues to serve as Chair of the Department of Respiratory Care and Diagnostic Science.

Expanding Clinical Education

Clinical education remains a central component of the KU respiratory care experience. Recent curricular changes have increased the amount of time students spend in clinical practice, with clinical rotation time doubling beginning in spring 2026. The program is also transitioning toward longer clinical experiences at individual facilities, allowing students to build stronger relationships with preceptors and clinical teams while developing increasing independence over time.

Students also receive extensive preparation in advanced airway management. Through collaboration with KUMC's anatomy program, respiratory care students participate in cadaver-based airway education that provides an opportunity to practice endotracheal intubation and apply their knowledge of upper-airway anatomy in a highly realistic setting. This experience allows students to develop airway-management skills before applying them in the clinical environment.

Students then have opportunities to translate these skills into patient care through dedicated operating room experiences with anesthesia providers. During these rotations, students participate in airway management and gain supervised experience with endotracheal intubation, connecting laboratory preparation with their clinical practice.

These clinical rotation experiences are part of a broader approach to competency development that incorporates laboratory practice, simulation, peer assessment, faculty validation, and repeated clinical evaluation. Together, these educational experiences are designed to move students progressively from skill acquisition toward competent, independent respiratory care practice.

KU Respiratory Care maintains relationships with clinical partners throughout the Kansas City metropolitan area, providing students with exposure to diverse health systems, patient populations, and specialty areas of respiratory care practice.

Class of 2026 Senior Capstone Projects

The KU Respiratory Care Class of 2026 completed its undergraduate education with senior capstone experiences designed to connect classroom learning, clinical practice, and evidence-based respiratory care. The capstone experience provides students with an opportunity to explore topics relevant to contemporary respiratory care, critically evaluate available evidence, and demonstrate their ability to communicate clinical information professionally. Through these experiences, students strengthen their skills in research, critical thinking, and the application of evidence to respiratory care practice. The capstone serves as a culminating academic experience, highlighting students' professional development and preparation to contribute to the evolving respiratory care profession.



Respiratory Therapy Degree Advancement

KUMC's online Bachelor of Science in Respiratory Care Degree Advancement program provides practicing registered respiratory therapists with an opportunity to complete a bachelor's degree while continuing their professional careers. The online curriculum builds upon previous respiratory care education and clinical experience while developing additional competencies in leadership, management, research, communication, critical thinking, and specialty practice. Students may pursue management coursework, specialty credential preparation, or a combination of these pathways. Students completing specialty-focused coursework have successfully pursued advanced NBRC credentials including Adult Critical Care Specialist (RRT-ACCS), Neonatal/Pediatric Specialist(RRT-NPS), and Asthma Educator (AE-C) credentials.

The program's capstone experience has also expanded into an increasingly interdisciplinary experience. Respiratory care students now complete the course alongside students from Cardiovascular Sonography, Diagnostic Ultrasound and

Vascular Technology, and Nuclear Medicine Technology programs. Recent respiratory care capstone projects have addressed topics including airway management, mechanical ventilation, pediatric asthma, therapeutic hypothermia, respiratory therapist-driven protocols, simulation, health disparities, and high-flow nasal cannula therapy.

KUMC has also expanded degree advancement opportunities internationally. Enrollment for the International BSRC Degree Advancement pathway opened in 2025, extending access to bachelor's-level respiratory care education beyond the United States.

Developing the Next Generation of Advanced Respiratory Practice

One of the department's most significant initiatives is the development of a graduate-level Advanced Practice Respiratory Therapy (APRT) program. KU is developing a hybrid master's-level APRT program designed to prepare experienced respiratory therapists for advanced clinical practice. The proposed program is being developed in response to increasing cardiopulmonary complexity, health care workforce needs, and gaps in access to specialty and rural care. Following development of the master's program, KU plans to pursue an optional third year of education leading to a clinical doctorate.

Program development has included a comprehensive needs assessment and workforce analysis, development of the RESP 700–765 curriculum framework, design of an advanced clinical residency model, and extensive budget and workforce planning. The proposed curriculum has completed Graduate Council approval, and the program continues to advance through institutional approval and accreditation processes.

A needs assessment involving 269 respondents demonstrated substantial interest in advanced respiratory practice. Practicing respiratory therapists identified interest in expanding their clinical scope and participating more fully in collaborative patient care. Physicians identified opportunities for advanced respiratory therapists to contribute to the care of complex patients, procedures, and interprofessional teams, particularly in critical care, pulmonology, and other specialty environments. Employers and clinical partners also identified opportunities for APRTs to help address workforce and access challenges in both urban and rural communities.

The initiative received additional support through a \$30,000 AARC Advanced RT Fund grant to assist with program development. The proposed hybrid format is intended to expand access to graduate respiratory care education while

allowing students to complete advanced clinical experiences with qualified partners. Through the development of the APRT program, KU seeks to contribute to the continued evolution of respiratory care practice while helping address cardiopulmonary health needs in Kansas and beyond.

Professional Engagement and Student Leadership

KU Respiratory Care encourages students to engage with the profession and their communities beyond the classroom and clinical environment. Students participate in professional organizations, educational conferences, community service, and leadership activities throughout the program.

For the past three years, KU respiratory care students have served as student medical volunteers at the American Lung Association Fight for Air Climb. In this role, students support participants during the event while working alongside other medical volunteers. The experience provides an opportunity for students to apply their respiratory care knowledge in a community setting while supporting an event dedicated to lung health and lung disease awareness.

Students also regularly participate in the Kansas Respiratory Care Society educational conference and the American Association for Respiratory Care International Congress, providing opportunities to learn from respiratory care professionals, explore developments within the profession, and build connections beyond the university.

The Respiratory Care Student Association provides additional opportunities for leadership, service, and professional engagement through student-led activities and fundraising efforts. Students also contribute directly to health professions education at KUMC by assisting with American Heart Association Basic Life Support courses offered across campus. More than 200 BLS certifications were completed during the past year, involving students from 11 different academic programs.



AARC Congress 2025



ALA Fight for Air Climb

Global Health and International Education

Global health continues to be a critical component of respiratory care education at KU. Through an interdisciplinary international educational experience in Ghana, students and faculty engage with health care professionals, hospitals, universities, and community partners while learning about health care delivery in settings with varying resources.

Recent work has placed particular emphasis on Helping Babies Breathe education and the development of sustainable training centers in rural and resource-limited areas. During a two-year period, interdisciplinary teams helped establish 14 new Helping Babies Breathe training centers and supported the advancement of four existing centers throughout Ghana.

The experience extends beyond short-term service. Participants work alongside established community partners at small community hospitals and large teaching hospitals, combining education and capacity building with cultural and historical experiences. These partnerships provide students with opportunities to better understand global health disparities, resource allocation, cultural humility, and the importance of sustainable international collaboration.



Looking Forward

Respiratory care continues to evolve as clinicians manage increasingly complex patients, expanding technologies, new models of care, and persistent workforce and access challenges. KU Respiratory Care is evolving alongside the profession.

Through continued investment in baccalaureate and degree advancement education, expanded clinical experiences, global health, research, interprofessional collaboration, and the development of advanced practice respiratory therapy education, the KUMC remains committed to preparing respiratory therapists not only for the profession as it exists today, but for the roles they will help define in the future.

University of Kansas [Medical Center](#) Campuses

The KUMC (KU Medical Center, photo page 1) serves as the academic health sciences center of the University of Kansas, with campuses in Kansas City, Salina, and Wichita. Through its three schools—Health Professions, Medicine, and Nursing—KUMC provides education, research, and professional training to prepare the next generation of health care professionals.

KUMC continues to experience significant growth. In fall 2026, enrollment increased by 3.9%, contributing to the university's third consecutive year of record enrollment. Through partnerships with clinical affiliates and educational institutions throughout Kansas, the Medical Center provides students with opportunities to gain experience in urban, rural, and underserved communities.

KU School of Health Professions

The KU School of Health Professions traces its history to allied health programs offered through the School of Medicine beginning in the 1930s. Formally established as the School of Allied Health in 1974, it became the School of Health Professions in 2011 to better reflect the breadth and evolution of the health professions represented within the school.

Today, the school comprises eight academic departments offering more than 30 academic programs, including undergraduate, graduate, doctoral, certificate, and post-professional educational opportunities. Located on the Kansas City campus, the school prepares students for careers in clinical practice, research, education, and health care leadership.

Through its academic programs and extensive network of clinical partnerships, the School of Health Professions emphasizes interprofessional education, evidence-based practice, research, and service to communities throughout Kansas and beyond.

The Department of Respiratory Care and Diagnostic Science contributes to this mission through respiratory care education, diagnostic science, clinical training, research, and the continued development of innovative educational pathways.

University of [Kansas](#) – Lawrence, KS (see photo below)

Founded in 1865, the University of Kansas is the state's flagship research university and a nationally recognized institution dedicated to education, research, and service.



In fall 2026, KU achieved the highest enrollment in university history for the third consecutive year, welcoming 31,464 students across its campus. This included 4,834 first-year students and a record freshman retention rate of 88.1%.

KU offers more than 400 degree and certificate programs and maintains a global alumni network exceeding 400,000 graduates. The university is also a member of the prestigious Association of American Universities, an organization representing leading research universities across North America.

As part of this comprehensive research institution, KU Medical Center shares the university's commitment to advancing knowledge, preparing future professionals, and improving the health and well-being of communities throughout Kansas, the nation, and the world.

Faculty and Staff



Lisa M. Trujillo, D.H.Sc., RRT, FAARC
Department Chair, Clinical Associate Professor



Chad Condren, Ph.D., RRT
Program Director, Clinical Associate Professor



Cheryl Skinner, MSc, RRT, CPFT, AE-C, FAARC

Program Director, Degree Advancement,
Clinical Assistant Professor



Lawrence Stein, MSRT, RRT

RRT-ACCS, RRT-NPS
Director of Clinical Education,
Clinical Assistant Professor



Ashley Barry, MPH, RRT
Clinical Assistant Professor



David Burnett, Ph.D., RRT
Associate Dean, Professor



Nicole Holifield, MSW, MLIS
Business Operations Manager

Adjunct Faculty:

Julie Rojas, RRT
Adjunct Clinical Instructor

Amanda McDaniel, MHA, RRT
Adjunct Clinical Instructor

Lauren Driscoll, MHPE, RRT, RRT-ACCS, RRT-NPS
Adjunct Clinical Instructor

Tony Randall, MHA, RRT, RRT-ACCS, RPFT, RRT-NPS
Adjunct Clinical Instructor

Wendy Castro, MS, RRT, RRT-ACCS, RRT-NPS, AE-C
Adjunct Clinical Instructor

Grant White, RRT
Adjunct Clinical Instructor

Contact Information

Chad Condren, Ph.D., RRT
Program Director
University of Kansas Medical Center
3901 Rainbow Blvd. MS 1013
Kansas City, Kansas 66160

[Department of Respiratory Care and Diagnostic Science](#)



Interview



Kathy Pellant, DHSc, RRT, RPSGT
Director of Clinical Education and Instructor
Respiratory Therapy Program
Radford University
Roanoke, Virginia

By Jeff Ward, MEd, RRT, FAARC
Mayo Clinic Multidisciplinary
Medical Simulation Center
Rochester, Minnesota

- 1. Tell us about your early days as a respiratory therapist.**
- What events/circumstances brought you into the profession?

I have an older sister who is a nurse, and initially, I wanted to follow her. To prepare for that new career choice, I began volunteering at the local hospital in Beckley, WV. I quickly realized that nursing was not for me. One day I was in the hospital's elevator, I asked about some equipment a staff member had with him. He took the time to explain that it was an ECG machine and that he was a respiratory therapist. That chance encounter planted the seed. After moving to Abingdon, VA, I joined the Medical Explorers Club at Johnston Memorial Hospital; it was a program for high school students interested in medical careers. The leader of the club was the RT Director, and through her mentorship, that seed became an aspiration. During my senior year of high school, I received a college scholarship offered by the hospital, which provided me with the opportunity to enter the respiratory therapy program at what was then the College of Health Sciences in Roanoke, VA.

Looking back, the two respiratory therapists—one I met briefly in an elevator and another who invested her time in mentoring me—played pivotal roles in my career choice. Neither may have realized the impact they had, but their willingness to share what they did and encourage a young student changed the direction of my career.

2. Who were your mentors?

-What/how did they contribute to your career?

I have been fortunate to have several mentors throughout my career who each influenced different parts of my professional journey. Looking back, I can see how their encouragement, support, and willingness to recognize opportunities helped shape the path that led me to my current role. Among those who had the greatest influence were the RT Director at Johnston Memorial Hospital, Mrs. Teresa Carroll, RPSGT, REEGT, CRT; former Manager of the Carilion Roanoke Sleep Center; Chase Poulsen, PhD, RRT-NPS, ACCS, Respiratory Therapy Program Director at Radford University; and Mr. Chris Blake, MBA, RRT, Senior Director of the Carilion Clinic Sleep Center.

Teresa Carroll was one of my earliest mentors. She led the Medical Explorers Club I joined in high school and initially encouraged my interest in respiratory therapy. She also helped me obtain the hospital scholarship that allowed me to attend the respiratory therapy program at what was then the College of Health Sciences. Her influence helped turn an initial interest into a career.

Mrs. Carroll was an important mentor when I moved from critical care into sleep medicine. I made the transition because I wanted to learn something new, and as the sleep center began recruiting RTs for both their knowledge about ventilation and clinical experience; Teresa encouraged me to expand my skills and continue learning. She also recognized my interest in teaching and gave me opportunities to develop those skills—coordinating monthly sleep conferences, creating staff competencies, developing orientation competencies, and working with RT students during their clinical rotations. She helped me see that teaching and leadership could be part of my career and encouraged me to apply for her manager position when she retired.

While I was working with Teresa Carroll, Dr. Poulsen collaborated with her to establish sleep center clinical rotations, and she assigned the preceptor role to me. During his clinical rounds, Dr. Poulsen regularly encouraged me to complete a bachelor's degree, saying they would need more teachers in the respiratory therapy program. His persistence paid off; I found an online Health Sciences BS program that worked for me. Shortly after completing the degree, an opportunity opened to teach in the RT procedures lab alongside the full-time faculty. I was fortunate enough to get the job. That experience ignited my interest in teaching and led me to pursue my master's degree in respiratory care. Dr. Poulsen continued to encourage me along the way, and that degree opened the door to the director of clinical education position I hold today.

Mr. Chris Blake was another important mentor as I moved into leadership roles. He knew that teaching was my long-term goal and told me he would support me in achieving it—which he did. While working as a manager under his leadership, he supported my adjunct teaching position in the RT lab. More importantly, Mr. Blake’s leadership style taught me a great deal about myself, my leadership, and the importance of getting outside my comfort zone. He was the first to congratulate me when I was hired to teach full time in the respiratory therapy program, and I would not have had the confidence to apply for the DCE position without the lessons he taught me.

Looking back, I can see that each mentor and each new role prepared me for the next opportunity. I never expected that I would end up teaching in an RT program, but all these individuals saw something in me that I did not see in myself. I am grateful to all the people who encouraged me along the way—and now I have the privilege of doing the same for my students.

3. How did furthering your education contribute to your career path?

Getting my bachelor’s degree was a personal goal, but it also led to an opportunity to teach in the RT procedures lab. I chose my master’s degree strategically, knowing it would make me eligible to teach full time in an RT program if a position became available. While I was in Northeastern University’s Master of Science Respiratory Care Leadership program, I recall Dr. Tom Barnes encouraging us to pursue doctoral degrees to assume further leadership roles within our profession. That advice stayed with me. I decided to pursue a doctorate so I could become more involved in college and university-level committees and opportunities. The degree has also helped me to participate in more interprofessional work with other medical programs. More importantly, it increased my awareness and appreciation for the respiratory therapy profession. Looking back, each degree has served a different purpose in my career, but together they have expanded the opportunities available to me and allowed me to contribute to the profession in ways I had not initially anticipated.

-What got you on your path towards leadership roles in the AARC and/or related organizations?

I am involved in AARC activities but currently, I have not assumed any formal leadership roles.

4. What are some key lessons you have learned as: clinician, educator, and leader in the profession?

As a clinician

One of the most important lessons I have learned is that patients want to be seen and heard, not just treated. Every patient brings individual values, needs, fears, and experiences to the interaction. Taking the time to genuinely ask about those things, actively listen, learn something about my patients, and meet patients where they are builds rapport and trust. I have also learned not to be afraid to ask questions when I do not know something. Asking is one of the best ways to learn, and it builds confidence over time.

As an educator:

I have learned that patients and students are not always ready or able to learn when I am ready to teach. Assessing readiness and giving some grace can make a significant difference. I have also learned that not everyone learns the way I do, which means that I have had to become more intentional about using different approaches to teaching. Engaging students in learning takes purposeful planning, time, and resources. If one strategy does not work, I have learned to try another, and getting to know my students has helped me determine what may work best for them.

As a leader in the profession

I have learned that there are usually at least two sides to every situation, and it is important not to make assumptions or decisions based on hearing only one. I have also learned to anticipate what I might need and prepare for different possibilities. In times of conflict or potential conflict, being kind, calm, and fair goes a long way. Most importantly, I have learned that I can do more than I sometimes think I can, and I want to instill that same confidence in my students.

As a respiratory therapist:

I have learned never to underestimate the power of sharing what respiratory therapists do with others—even if that means talking to a teenager in an elevator! If I am not excited about my profession, I cannot expect others to be excited about joining it. I try to leave the difficult days and experiences in the past and focus on sharing the positive impact we can have. I also believe that when we can instruct students, we should approach it with a positive attitude and focus on what they can learn from the interaction; a negative experience can quickly turn a student away from something they might otherwise love. Finally, when an opportunity comes along to learn something new or take on a new role, we should

take it. Being open to the opportunities placed in our path can lead us places we never expected to go. It is how I got to where I am today.

5. What would you recommend to new graduate therapists just beginning their career?

Never stop learning. Regularly seek new knowledge, reflect on your experiences, and do not be afraid to ask questions. Being a new graduate does not mean you are expected to know everything; it means you are beginning a career in which there will always be something new to learn.

Be part of the healthcare team. Take your place, communicate often, choose to work well with others, and be willing to help when needed. At the same time, do not just do the job well. Be accountable for your work and for the care you provide. Your reputation as a respiratory therapist is built on the small decisions and interactions you have every day.

Find respiratory therapists you admire, respect, and ask if they can be mentors. Good mentors can help you grow professionally, navigate challenging situations, and find ways to balance the stressors that come with working in healthcare.

Finally, stay connected to your professional organizations. Understand what they can do for you, take advantage of the resources they provide, and be active as part of your vocation. Your career is not just about the job you have today; it is also about continuing to grow and contributing to the profession along the way.



ACRTE Meet & Greet

Join ACRTE for Drinks and Fellowship

Sunday, November 15; 4:30-5:30pm

at 55 Fahrenheit Bar inside the

Marriott New Orleans

555 Canal Street

Be first to learn about NEW ACRTE Initiatives!

Marriot Lobby Bar 55 Fahrenheit



- **Comprehensive Bar Service:** 55 Fahrenheit, described as a "sleek wine bar and restaurant," offers a wide range of beverages, including a full selection of spirits, wines, and beers. Our drinks are noted for being "reasonable, especially for a hotel bar," providing excellent value.
- **Ideal for Socializing:** The lounge is recognized as a "great spot to meet people" and generally "a lot of fun," fostering a lively yet relaxed social environment.

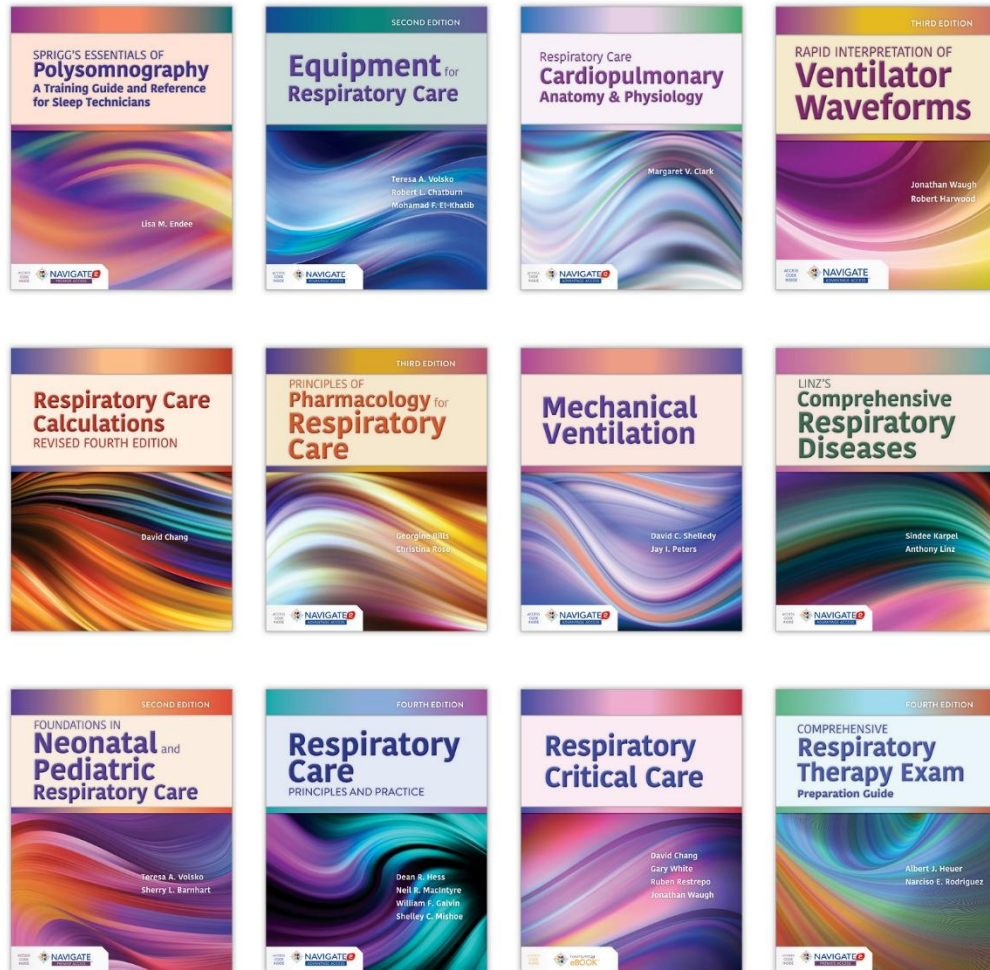
ASRT to BSRT & MSRC Degree Advancement Programs
BSRT and MSRT Entry Programs
Graduate Respiratory Therapist Programs
www.acrte.org

Professional Positions Posted

- *Augusta University**
- *Cabarrus College**
- *Georgia State University**
- *UT Health San Antonio**

ACRTE program directors may submit requests for posting of faculty career opportunities by using the acrte.org "Contact" form.

A Full-Curriculum Approach to Respiratory Care Education



Learn More and Get Access
go.JBLearning.com/RespiratoryCare

ACRTE Institutional Members

Augusta University
Bellarmino University
Boise State University
Butler University
Cabarrus College of Health Sciences
Carlow University
California Society for Respiratory Care
CHI St. Alexius Health/University of Mary
College of Southern Nevada
Daytona State College
East Tennessee State University
Georgia Southern University
Georgia State University
Jacksonville State University
Jacksonville University
Liberty University
Louisiana State University Health - New Orleans
Massachusetts College of Pharmacy and Allied Health Sciences
Mayo Clinic School of Health Sciences/University of Minnesota Rochester
Middle Georgia State University
Midwestern State University
Nebraska Methodist College
Newberry College
North Carolina Respiratory Care Board
Nova Southeastern University
Ozark Technical College
Radford University
Respiratory Care Board of California
Rowan University
Rush University

Salisbury University
Southern Connecticut State University
St Catherine University
SUNY Stony Brook
SUNY Upstate Medical University
Tennessee State University
Texas Society for Respiratory Care
Texas State University
The Ohio State University
Thomas Jefferson University
University of Akron
University of Arkansas for Medical Sciences
University of Cincinnati
University of Hartford
University of Kansas Medical Center
University of Michigan Flint
University of Missouri
University of Nebraska Medical Center
University of North Carolina – Charlotte
University of North Carolina – Wilmington
University of Texas Medical Branch – Galveston
University of Texas Health Science Center San Antonio
University of Toledo
University of West Alabama
Utah Society for Respiratory Care
Valencia College
Victoria College
Weber State University
West Chester University/Bryn Mawr Hospital
Yosemite Community College (Modesto Junior College)
Youngstown State University



If you have not already decided to become an ACRTE member after visiting www.acrte.org, the following are 15 reasons why you should join ACRTE.

Reasons Why You Should Become an ACRTE Member

1. Award scholarships to associate, baccalaureate, and graduate respiratory therapy students.
2. Help in the development of ASRT to BSRT Bridge Programs.
3. Collectively work towards the day when all respiratory therapists enter the profession with a baccalaureate or graduate degree in respiratory care.
4. Support a national association, representing colleges/universities awarding associate, baccalaureate, and graduate degrees in respiratory care, to move forward the recommendations of the third 2015 conference.
5. Help start new baccalaureate and graduate RT programs thus leading to a higher quality respiratory therapist entering the workforce.
6. Work to change the image of the RT profession from technical-vocational-associate degree education to professional education at the baccalaureate and graduate degree level.
7. Mentoring program for new graduates as well as new faculty members.
8. Join colleagues to collectively develop standards for baccalaureate and graduate respiratory therapist education.
9. Develop public relations programs to make potential students aware of baccalaureate and graduate respiratory therapist programs.
10. Help to publicize, among department directors/managers, the differences between respiratory therapists with associate, baccalaureate, and graduate degrees.
11. Access to Spotlight articles on BSRT and RT graduate programs, and major medical centers.
12. Round table discussion dinners and Meet & Greet member receptions held in conjunction with the AARC Summer Forum and the International Congress.
13. Help support a roster and website for all baccalaureate and graduate respiratory therapist programs.
14. Collaborate with NBRC, CoARC, and AARC to improve respiratory therapy education.
15. Faculty development through financial support and publishing/presenting opportunities.

Editorial Board

Thomas A. Barnes, EdD, RRT, FAARC – Editor in Chief

Northeastern University
Boston, Massachusetts

Will Beachey, PhD, RRT, FAARC

CHI St. Alexius Health/University of Mary
Bismarck, North Dakota

Randy Case, PhD, RRT, RRT-NPS

Midwestern State University
Wichita Falls, Texas

Paul Eberle, PhD, RRT, FAARC

Weber State University
Ogden, Utah

Christy Kane, PhD, RRT, RRT-ACCS, RRT-NPS, AE-C, FAARC

Butler University
Indianapolis, IN

Gregg Marshall, PhD, RRT, RPSGT, RST, FAARC

Texas State University – Round Rock Campus
Round Rock, Texas

Timothy Op't Holt, EdD, RRT, AE-C, FAARC

University of South Alabama
Mobile, Alabama

José D. Rojas, PhD, RRT, RPFT, FAARC

University of Texas Medical Branch at Galveston,
Galveston, Texas

Jeffrey J. Ward, MEd, RRT, FAARC

Mayo Clinic Multidisciplinary Medical Simulation Center
Rochester, Minnesota



American College of Respiratory Therapy Education
“Dedicated to Improving Respiratory Therapy Education”
www.acrte.org