AL BOAR			ll.	gniti Level		
• PATORY STATES	Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
I. PATIENT I	DATA		15	27	8	50
A. Eval	uate Data in the Patient Record		4	6	0	10
2. 3.	Patient history, for example,					
5.	 sputum culture and sensitivities cardiac biomarkers Blood gas analysis and / or hemoximetry (CO- 					
6. 7.	oximetry) results Pulmonary function testing results, for example • spirometry • lung volumes • DLCO 6-minute walk test results					
8.	Imaging study results, for example, chest radiograph CT scan ultrasonography and / or echocardiography PET scan ventilation / perfusion scan					
9.	Maternal and perinatal / neonatal history, for example, • APGAR scores • gestational age • L / S ratio Sleep study results, for example,					
10.	apnea-hypopnea index (AHI)					

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Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
11. Trends in monitoring results					
a. fluid balance					
b. vital signs					
c. intracranial pressure					
d. ventilator liberation parameters					
e. pulmonary mechanics					
f. noninvasive, for example,					
 pulse oximetry 					
 capnography 					
transcutaneous					
g. cardiac evaluation / monitoring results, for					
example,					
• ECG					
hemodynamic parameters					
12. Determination of a patient's pathophysiological star	te				
B. Perform Clinical Assessment		3	6	1	10
 Interviewing a patient to assess 					
 a. level of consciousness and orientation, 					
emotional state, and ability to cooperate					
b. level of pain					
c. shortness of breath, sputum production, and					
exercise tolerance					
d. smoking history					
e. environmental exposures					
f. activities of daily living					
g. learning needs, for example,					
• literacy					
preferred learning style					
• social / cultural					
2. Performing inspection to assess					
a. general appearance					
b. characteristics of the airway, for example,					
patency Mallament classification					
Mallampati classification tracked chift					
tracheal shift south court and character					
c. cough, sputum amount and character			-		
d. status of a neonate, for example,					
APGAR score					
 gestational age 					

AL BOAR			C	ogniti Level		
TATORY OF	Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
	e. skin integrity, for example,					
	• pressure ulcers					
	• stoma site					
3.	Palpating to assess					
	a. pulse, rhythm, intensity					
	b. accessory muscle activity					
	 c. asymmetrical chest movements, tactile fremitus, crepitus, tenderness, tactile rhonchi, 					
	and / or tracheal deviation					
4.	Performing diagnostic chest percussion					
5.	Auscultating to assess					
0.	a. breath sounds					
	b. heart sounds and rhythm					
	c. blood pressure					
6.	Reviewing a chest radiograph to assess					
	a. quality of imaging, for example,					
	patient positioning					
	penetration					
	 lung inflation 					
	 b. presence and position of airways, lines, and drains 					
	c. presence of foreign bodies					
	d. heart size and position					
	e. presence of, or change in,					
	(i) cardiopulmonary abnormalities, for					
	example,					
	pneumothorax					
	 consolidation 					
	 pleural effusion 					
	pulmonary edema					
	 pulmonary artery size 					
	(ii) diaphragm, mediastinum, and / or trachea					
C. Perf	form Procedures to Gather Clinical Information		4	7	1	12
1.	12-lead ECG					
2.	Noninvasive monitoring, for example,					
	• pulse oximetry					
	• capnography					
	• transcutaneous					
3.	Peak flow					

BOARD				gniti Level		
• PARTORY CONTROL OF THE PARTORY CONTROL OF T	Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
4.	Mechanics of spontaneous ventilation linked to tidal					
	volume, minute volume, maximal inspiratory pressure,					
	and vital capacity					
5.	Blood gas sample collection					
6.	Blood gas analysis and / or hemoximetry (CO-					
	oximetry)					
	Oxygen titration with exercise					
8.	1 , , , , , , , , , , , , , , , , , , ,					
	• P(A-a)O ₂					
	• V _D /V _T					
	• P/F					
	• OI					
9.	Hemodynamic monitoring					
10.	Pulmonary compliance and airways resistance					
11.	Plateau pressure					
12.	Auto-PEEP determination					
13.	Spontaneous breathing trial (SBT)					
14.	Apnea monitoring					
15.	Apnea test (brain death determination)					
	Overnight pulse oximetry					
	CPAP / NPPV titration during sleep					
18.	Cuff management, for example,					
	• tracheal					
	laryngeal					
19.	Sputum induction					
20.	Cardiopulmonary stress testing					
21.	6-minute walk test					
22.	Spirometry outside or inside a pulmonary function laboratory					
23.	DLCO inside a pulmonary function laboratory					
24.	Lung volumes inside a pulmonary function laboratory					
25.	Tests of respiratory muscle strength - MIP and MEP					
26.	Therapeutic bronchoscopy					
	uate Procedure Results		2	4	4	10
1.	12-lead ECG				-	
2.	Noninvasive monitoring, for example,					
	• pulse oximetry					
	• capnography					
	• transcutaneous					
3.	Peak flow					
J.			<u> </u>	L		

AL BOAR				gniti Level		
TORY OF	Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
4.	Mechanics of spontaneous ventilation linked to tidal volume, minute volume, maximal inspiratory pressure, and vital capacity					
5.	Blood gas analysis and / or hemoximetry (CO-oximetry)					
6.	Oxygen titration with exercise					
7.	Cardiopulmonary calculations, for example, • P(A-a)O ₂ • V _D / V _T • P / F • OI					
8.	Hemodynamic monitoring					
9.	Pulmonary compliance and airways resistance					
10.	Plateau pressure					
11.	Auto-PEEP					
12.	Spontaneous breathing trial (SBT)					
13.	Apnea monitoring					
14.	Apnea test (brain death determination)					
-	Overnight pulse oximetry					
16.	CPAP / NPPV titration during sleep					
17.	Cuff status, for example, • laryngeal • tracheal					
18.	Cardiopulmonary stress testing					
19.	6-minute walk test					
20.	Spirometry outside or inside a pulmonary function laboratory					
21.	DLCO inside a pulmonary function laboratory					
22.	Lung volumes inside a pulmonary function laboratory					
23.	Tests of respiratory muscle strength - MIP and MEP					
E. Rec	ommend Diagnostic Procedures		2	4	2	8
1.	Testing for tuberculosis					
2.	 Laboratory tests, for example, CBC electrolytes coagulation studies sputum culture and sensitivities cardiac biomarkers 					
3.	Imaging studies					

NA BOARD				ogniti Level		
• TORN CHI	Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
4.	Bronchoscopy					
	a. diagnostic					
	b. therapeutic					
5.	Bronchoalveolar lavage (BAL)					
6.	Pulmonary function testing					
7.	Noninvasive monitoring, for example,					
	 pulse oximetry 					
	capnography					
	• transcutaneous					
8.	Blood gas and/or hemoximetry (CO-oximetry)					
9.	ECG					
10.	Exhaled gas analysis, for example,					
	• CO ₂					
	• CO					
	• FENO					
	Hemodynamic monitoring					
12.	Sleep studies					
13.	Thoracentesis					
	SHOOTING AND QUALITY CONTROL OF DEVICES, ECTION CONTROL		8	9	3	20
A. Asse	emble / Troubleshoot Devices		4	8	3	15
1.	Medical gas delivery interfaces, for example,					
	• mask					
	• cannula					
	 heated high-flow nasal cannula 					
2.	Long-term oxygen therapy					
3.	Medical gas delivery, metering, and /or clinical					
	analyzing devices, for example,					
	• concentrator					
	• liquid system					
	• flowmeter					
	• regulator					
	• gas cylinder					
	• blender					
	• air compressor					
	• gas analyzers					
4.	CPAP / NPPV with patient interfaces					
5.	Humidifiers					
6.	Nebulizers					
7.	Metered-dose inhalers, spacers, and valved holding chambers					
	CHAINDELD		<u> </u>			

Detailed Content Outline Items are linked to open cells.	AL BOAR				ogniti Level		
9. Resuscitation equipment, for example,	TATORY OF		Ethics	Recall	Application	Analysis	Totals
self-inflating resuscitator iflow-inflating resuscitator AED 10. Mechanical ventilators 11. Intubation equipment 12. Artificial airways 13. Suctioning equipment, for example, regulator canister tubing catheter 14. Blood analyzers, for example, hemoximetry (CO-oximetry) point-of-care blood gas 15. Patient breathing circuits 16. Hyperinflation devices 17. Secretion clearance devices 18. Heliox delivery device 19. Portable spirometer 20. Testing equipment in a pulmonary function laboratory 21. Pleural drainage 22. Noninvasive monitoring, for example, pulse oximeter capnometer transcutaneous 23. Bronchoscopes and light sources 24. Hemodynamic monitoring a. pressure transducers b. catheters, for example, arterial pulmonary artery 8. Ensure Infection Prevention donning/doffing	8.	Dry-powder inhalers (DPI)					
• flow-inflating resuscitator • AED 10. Mechanical ventilators 11. Intubation equipment 12. Artificial airways 13. Suctioning equipment, for example, • regulator • canister • tubing • catheter 14. Blood analyzers, for example, • hemoximetry (CO-oximetry) • point-of-care • blood gas 15. Patient breathing circuits 16. Hyperinflation devices 17. Secretion clearance devices 18. Heliox delivery device 19. Portable spirometer 20. Testing equipment in a pulmonary function laboratory 21. Pleural drainage 22. Noninvasive monitoring, for example, • pulse oximeter • transcutaneous 23. Bronchoscopes and light sources 24. Hemodynamic monitoring a. pressure transducers b. catheters, for example, • arterial • pulmonary artery B. Ensure Infection Prevention policies and procedures, for example, • Standard Precautions • donning/doffing	9.	Resuscitation equipment, for example,					
Nechanical ventilators 11. Intubation equipment 12. Artificial airways 13. Suctioning equipment, for example,							
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11. Intubation equipment 12. Artificial airways 13. Suctioning equipment, for example,							
12. Artificial airways 13. Suctioning equipment, for example, • regulator • canister • tubing • catheter 14. Blood analyzers, for example, • hemoximetry (CO-oximetry) • point-of-care • blood gas 15. Patient breathing circuits 16. Hyperinflation devices 17. Secretion clearance devices 18. Heliox delivery device 19. Portable spirometer 20. Testing equipment in a pulmonary function laboratory 21. Pleural drainage 22. Noninvasive monitoring, for example, • pulse oximeter • capnometer • transcutaneous 23. Bronchoscopes and light sources 24. Hemodynamic monitoring a. pressure transducers b. catheters, for example, • arterial • pulmonary artery B. Ensure Infection Prevention 2 0 0 2 1. Adhering to infection prevention policies and procedures, for example, • Standard Precautions • donning/doffing							
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23. Bronchoscopes and light sources 24. Hemodynamic monitoring a. pressure transducers b. catheters, for example,		•					
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b. catheters, for example,	24.	, ,					
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procedures, for example, • Standard Precautions • donning/doffing	B. Ensu			2	0	0	2
procedures, for example, • Standard Precautions • donning/doffing	1.	Adhering to infection prevention policies and					
Standard Precautionsdonning/doffing	1						
donning/doffing							
		• isolation					

Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.
3. Proper handling of biohazardous materials C. Perform Quality Control Procedures 1. Blood analyzers 2. Gas analyzers 3. Pulmonary function equipment for testing a. spirometry results b. lung volumes c. diffusing capacity (DLCO) 4. Mechanical ventilators 5. Noninvasive monitors III. INITIATION AND MODIFICATION OF INTERVENTIONS A. Maintain a Patent Airway Including the Care of Artificial
C. Perform Quality Control Procedures 2 1 0 3 1. Blood analyzers 2
1. Blood analyzers 2. Gas analyzers 3. Pulmonary function equipment for testing a. spirometry results b. lung volumes c. diffusing capacity (DLCO) 4. Mechanical ventilators 5. Noninvasive monitors III. INITIATION AND MODIFICATION OF INTERVENTIONS 10 30 30 70 A. Maintain a Patent Airway Including the Care of Artificial
2. Gas analyzers 3. Pulmonary function equipment for testing a. spirometry results b. lung volumes c. diffusing capacity (DLCO) 4. Mechanical ventilators 5. Noninvasive monitors III. INITIATION AND MODIFICATION OF INTERVENTIONS 10 30 30 70 A. Maintain a Patent Airway Including the Care of Artificial
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III. INITIATION AND MODIFICATION OF INTERVENTIONS 10 30 30 70 A. Maintain a Patent Airway Including the Care of Artificial
A. Maintain a Patent Airway Including the Care of Artificial
' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
1. Proper positioning of a patient
2. Recognition of a difficult airway
3. Establishing and managing a patient's airway
a. nasopharyngeal airway
b. oropharyngeal airway
c. esophagealtracheal tubes / supraglottic airways
d. endotracheal tube
e. tracheostomy tube
f. laryngectomy tube
g. speaking valves
h. devices that assist with intubation, for example,
endotracheal tube exchanger
video laryngoscopy
4. Performing tracheostomy care
5. Exchanging artificial airways
6. Maintaining adequate humidification
7. Initiating protocols to prevent ventilator-associated
infections
8. Performing extubation
B. Perform Airway Clearance and Lung Expansion Techniques 2 2 1 5
Postural drainage, percussion, or vibration
2. Suctioning, for example,
• nasotracheal
oropharyngeal

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Therapist Multiple-Choice Ex Detailed Content Out Items are linked to open cell	ine	Ethics	Recall	Application	Analysis	Totals
 3. Mechanical devices, for example, high-frequency chest wall oscilla vibratory PEP intrapulmonary percussive venti insufflation / exsufflation 4. Assisted cough, for example, 						
 huff abdominal thrust Hyperinflation therapy 						
6. Inspiratory muscle training						
C. Support Oxygenation and Ventilation			1	5	9	15
1. Initiating and adjusting oxygen the						
2. Minimizing hypoxemia, for examplepatient positioningsecretion removal						
3. Initiating and adjusting mask or na						
 Initiating and adjusting mechanica settings 						
a. continuous mechanical ventil	ation					
b. noninvasive ventilation						
c. high-frequency ventilation						
d. alarms 5. Recognizing and correcting patient dyssynchrony	:-ventilator					
6. Utilizing ventilator graphics						
7. Performing lung recruitment mane						
8. Liberating a patient from mechanic	cal ventilation					
D. Administer Medications and Specialty G	ases		1	3	0	4
Aerosolized preparations						
a. antimicrobials b. pulmonary vasodilators	-					
C. bronchodilators						
d. mucolytics / proteolytics	1					
e. steroids						
2. Endotracheal instillation						
3. Specialty gases, for example,						
• heliox						
inhaled NO						

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Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
E. Ensure Modifications are Made to the Respiratory Care Plan		1	7	10	18
 Treatment termination, for example, 					
 life-threatening adverse event 					
2. Recommendations					
 a. starting treatment based on patient response 					
b. treatment of pneumothorax					
c. adjustment of fluid balance					
d. adjustment of electrolyte therapy					
e. insertion or change of artificial airway					
f. liberating from mechanical ventilation					
g. extubation					
h. discontinuing treatment based on patient					
response					
i. consultation from a physician specialist					
3. Recommendations for changes					
a. patient position					
b. oxygen therapy					
c. humidification					
d. airway clearance					
e. hyperinflation					
f. mechanical ventilation					
4. Recommendations for pharmacologic interventions					
a. bronchodilators					
b. anti-inflammatory drugs					
c. mucolytics and proteolytics					
d. aerosolized antibiotics					
e. inhaled pulmonary vasodilators					
f. cardiovascular					
g. antimicrobials					
h. sedatives and hypnotics					
i. analgesics					
j. narcotic antagonists					
k. benzodiazepine antagonists					
l. neuromuscular blocking agents					
m. diuretics					
n. surfactants					
o. changes to drug, dosage, administration					
frequency, mode, or concentration					

Effective: January 2020

SAL BOARD			ogniti Level		
Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
F. Utilize Evidence-Based Practice		0	2	4	6
Classification of disease severity					
Recommendations for changes in a therapeutic plan when indicated					
3. Application of guidelines, for example,ARDSNetNAEPPGOLD					
G. Provide Respiratory Care in High-Risk Situations		0	2	3	5
1. Emergency					
a. cardiopulmonary emergencies, excluding CPR					
b. disaster management					
c. medical emergency team (MET) / rapid response team					
Interprofessional communication					
3. Patient transport					
a. land / air between hospitals					
b. within a hospital					
H. Assist a Physician / Provider in Performing Procedures		1	3	0	4
1. Intubation					
2. Bronchoscopy					
Specialized bronchoscopy, for example,					
 endobronchial ultrasound (EBUS) 					
 navigational bronchoscopy (ENB) 					
4. Thoracentesis					
5. Tracheotomy					
6. Chest tube insertion					
7. Insertion of arterial or venous catheters					
8. Moderate (conscious) sedation					
9. Cardioversion					
10. Withdrawal of life support					
I. Conduct Patient and Family Education		1	2	0	3
Safety and infection control					
Home care and related equipment					
3. Lifestyle changes, for example,					
• smoking cessation					
• exercise					

Effective: January 2020

AL BOARD				gniti Level		
TATORY OF	Therapist Multiple-Choice Examination Detailed Content Outline Items are linked to open cells.	Ethics	Recall	Application	Analysis	Totals
4.	Pulmonary rehabilitation					
5.	Disease / condition management, for example,					
	Totals	3	33	66	41	140

Additional Specifications			
Patient Type	Target	Minimum	Maximum
Pediatric — 1 month to 17 years of age	4	3	8
Neonatal — birth to 1 month of age	3	2	5
Adult or General	balance		
Total	140		

Effective: January 2020

Patient Conditions

GENERAL BARIATRIC

COPD NEONATAL

ASTHMA BRONCHIOLITIS

HEART FAILURE NEUROMUSCULAR

POST-SURGICAL PSYCHIATRIC

GERIATRIC CONGENITAL DEFECTS

CARDIOVASCULAR CYSTIC FIBROSIS

INFECTIOUS DISEASE BURN/INHALATION INJURY

PULMONARY VASCULAR DISEASE LUNG TRANSPLANTATION

TRAUMA APNEA

IMMUNOCOMPROMISED HOST INTERSTITIAL LUNG DISEASE

NEUROLOGIC DRUG OVERDOSE

RDS TRAUMATIC BRAIN INJURY (TBI)

PEDIATRIC SEPSIS

DISORDERS OF PREMATURITY LUNG CANCER

PULMONARY EMBOLISM

SHOCK