Credential Maintenance Program		Ite	ems	
SAL BOAD			nitive evel	
Respiratory Therapist Assessment Detailed Content Outline  Items are linked to open cells.  *Test takers will be asked to integrate (apply or analyze) information.	Ethics	Recall	Integration*	Totals
First Quarter of the Calendar				10
I. PATIENT DATA		4	4	8
A. Evaluate Data in the Patient Record		2	2	4
1. Patient history, for example,				
<ol> <li>Blood gas analysis and / or hemoximetry (CO- oximetry) results</li> </ol>				
<ul> <li>6. Pulmonary function testing results, for example</li> <li>spirometry</li> <li>lung volumes</li> <li>DLCO</li> </ul>				
7. 6-minute walk test results				
<ul> <li>8. Imaging study results, for example,</li> <li>chest radiograph</li> <li>CT scan</li> <li>ultrasonography and / or echocardiography</li> <li>PET scan</li> <li>ventilation / perfusion scan</li> </ul>				

Credential Maintenance Program	Items			
BOY			nitive	
Respiratory Therapist Assessment		Le	evel	
Detailed Content Outline	Etl		Int	To
Items are linked to open cells.	Ethics	Recal	ntegration*	<b>Cotals</b>
*Test takers will be asked to integrate (apply or analyze) information.	•.	call	atio	•-
			on*	
9. Maternal and perinatal / neonatal history, for				
example,				
<ul> <li>APGAR scores</li> </ul>				
• gestational age				
• L / S ratio				
10. Sleep study results, for example,				
apnea-hypopnea index (AHI)  Treads is a secretaria a resulta.				
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     sappagraphy				
<ul><li>capnography</li><li>transcutaneous</li></ul>				
g. cardiac evaluation / monitoring results, for				
example,				
• ECG				
<ul> <li>hemodynamic parameters</li> </ul>				
12. Determination of a patient's pathophysiological				
state				
B. Perform Clinical Assessment		1	1	2
<ol> <li>Interviewing a patient to assess</li> </ol>				
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     mosformed leave in a stude				
<ul><li>preferred learning style</li><li>social / cultural</li></ul>				
▼ Sucidi / Cultuidi				

Credential Maintenance Program	Items			
Respiratory Therapist Assessment			nitive evel	
Detailed Content Outline  Items are linked to open cells.	Ethics	Recal	Integration*	Totals
*Test takers will be asked to integrate (apply or analyze) information.		all	tion*	
<ol><li>Performing inspection to assess</li></ol>				
a. general appearance				
<ul> <li>b. characteristics of the airway, for example,</li> <li>patency</li> <li>Mallampati classification</li> <li>tracheal shift</li> </ul>				
c. cough, sputum amount and character				
<ul><li>d. status of a neonate, for example,</li><li>APGAR score</li><li>gestational age</li></ul>				
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				
a. breath sounds				
b. heart sounds and rhythm				
c. blood pressure				
6. Reviewing a chest radiograph to assess				
<ul> <li>a. quality of imaging, for example,</li> <li>patient positioning</li> <li>penetration</li> <li>lung inflation</li> </ul>				
b. presence and position of airways, lines, and drains				
c. presence of foreign bodies				
d. heart size and position				

Credential Maintenance Program		Ite	ems	
BOAN BOAN			nitive	
Respiratory Therapist Assessment		L€	evel	
Detailed Content Outline	Etl		Int	To
Items are linked to open cells.	Ethics	Recal	tegration*	<b>Fotals</b>
*Test takers will be asked to integrate (apply or analyze) information.		all	atic	
			n*	
e. presence of, or change in,				
(i) cardiopulmonary abnormalities, for				
example,				
<ul> <li>pneumothorax</li> </ul>				
<ul> <li>consolidation</li> </ul>				
pleural effusion				
pulmonary edema				
pulmonary artery size				
(ii) diaphragm, mediastinum, and / or trachea				
C. Perform Procedures to Gather Clinical		1	0	1
Information		-	Ŭ	
1. 12-lead ECG				
2. Noninvasive monitoring, for example,				
pulse oximetry				
• capnography				
• transcutaneous				
3. Peak flow				
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)				
7. Oxygen titration with exercise				
8. Cardiopulmonary calculations, for example,				
• P(A-a)O <sub>2</sub>				
• V <sub>D</sub> / V <sub>T</sub>				
• 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)				

	Credential Maintenance Program	Items			
NI BOAN				nitive	
100 104/2 100 104/2 100 104/2	Respiratory Therapist Assessment		Le	evel	
	Detailed Content Outline	Εt		Int	To
COMPANY SEA THE SEA	Items are linked to open cells.	Ethics	Re	[eg	Totals
ATOR	·	S	Recal	rati	S
* i est take	rs will be asked to integrate (apply or analyze) information.		1	tegration*	
16.	Overnight pulse oximetry			*	
17.	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				
	luate Procedure Results		O	1	1
1.	12-lead ECG				
2.	Noninvasive monitoring, for example,				
	pulse oximetry				
	• capnography				
	• transcutaneous				
3.	Peak flow				
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-				
5.	oximetry)				
6.	Oxygen titration with exercise				
7.	Cardiopulmonary calculations, for example,				
,	• P(A-a)O <sub>2</sub>				
	• V <sub>D</sub> / V <sub>T</sub>				
	• P/F				
	• OI				
8.	Hemodynamic monitoring				
9.	Pulmonary compliance and airways resistance				
10.	Plateau pressure				
11.	Auto-PEEP				

	Credential Maintenance Program	Items			
N ROAD				nitive	
STATE OF THE PARTY	Respiratory Therapist Assessment		Le	evel	
	<b>Detailed Content Outline</b>	E		In	To
The same same	Items are linked to open cells.	Ethics	R	teg	<b>Fotals</b>
RATORY	·	Š	Recal	rat	S
*Test take	rs will be asked to integrate (apply or analyze) information.		=	ntegration*	
				*	
12.	Spontaneous breathing trial (SBT)				
13.	Apnea monitoring				
14.	Apnea test (brain death determination)				
15.	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  Tests of respiratory muscle strength - MIP and MEP				
E. Rec	ommend Diagnostic Procedures		0	0	O
1.	Testing for tuberculosis				
	Laboratory tests, for example,				
2.	CBC				
	• electrolytes				
	• coagulation studies				
	• sputum culture and sensitivities				
	• cardiac biomarkers				
3.	Imaging studies				
4.	Bronchoscopy				
'	a. diagnostic				
	b. therapeutic				
5.	Bronchoalveolar lavage (BAL)				
6.	Pulmonary function testing				
7.	Noninvasive monitoring, for example,				
7.	• pulse oximetry				
	• capnography				
	• transcutaneous				
8.	Blood gas and/or hemoximetry (CO-oximetry)				
9.	ECG				

	Tredential Maintenance Program	Items			
BOO	redeficial Maintenance Frogram		Cog	nitive	
	<b>Respiratory Therapist Assessment</b>		Le	evel	
	<b>Detailed Content Outline</b>	Et		In	To
Company State of the Company of the	Items are linked to open cells.	Ethics	Recal	tegration*	Totals
*Test taker	rs will be asked to integrate (apply or analyze) information.	<b>Q</b> 1	call	ati	<b>V</b> 3
rest taker	3 will be asked to integrate (apply of analyze) information.			on*	
10.	Exhaled gas analysis, for example,				
	• CO <sub>2</sub>				
	• CO				
	• FENO				
11.	Hemodynamic monitoring Sleep studies				
12.	Thoracentesis				
II. TROUBLE	SHOOTING AND QUALITY CONTROL OF				
	AND INFECTION CONTROL		3	4	7
A. Asse	emble / Troubleshoot Devices		1	4	5
1.	Medical gas delivery interfaces, for example,				
	• mask				
	<ul><li>cannula</li><li>heated high-flow nasal cannula</li></ul>				
2.	Long-term oxygen therapy				
3.	Medical gas delivery, metering, and /or clinical				
3.	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				
8.	Dry-powder inhalers (DPI)				
9.	Resuscitation equipment, for example,				
	• self-inflating resuscitator				
	flow-inflating resuscitator				
	• AED				
10.	Mechanical ventilators				
11.	Intubation equipment				

	Credential Maintenance Program	Items			
AL BOAD	8		Cognitive		
	Respiratory Therapist Assessment		Le	evel	
	<b>Detailed Content Outline</b>	Etł		Int	Tot
TONY OF THE PROPERTY OF THE PR	Items are linked to open cells.	Ethics	Recal	ntegration*	<b>Fotals</b>
*Test take	rs will be asked to integrate (apply or analyze) information.		:all	atio	· ·
				°,	
Second Quarte	r of the Calendar				10
12.	Artificial airways				
13.	Suctioning equipment, for example,				
	• regulator				
	• canister				
	• tubing				
-	• catheter				
14.	Blood analyzers, for example,				
	<ul><li>hemoximetry (CO-oximetry)</li><li>point-of-care</li></ul>				
	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				
	<ul><li>capnometer</li><li>transcutaneous</li></ul>				
23.	Bronchoscopes and light sources				
24.	Hemodynamic monitoring				
24.	a. pressure transducers				
	b. catheters, for example,				
	arterial				
	pulmonary artery				
B. Ens	ure Infection Prevention		1	0	1
1.	Adhering to infection prevention policies and				
	procedures, for example,				
	<ul> <li>Standard Precautions</li> </ul>				
	<ul><li>donning/doffing</li></ul>				
	• isolation				

	Credential Maintenance Program	Items			
ROA	redeficial Maintenance 1 10gram		Cog	nitive	
STATE BOARD	Respiratory Therapist Assessment		Le	evel	
	<b>Detailed Content Outline</b>	Et		In	To
Company State of the Company of the	Items are linked to open cells.	Ethics	Re	ntegration*	<b>Fotals</b>
RATORY		S	Recal	rat	S
*Test take	rs will be asked to integrate (apply or analyze) information.		=	ion	
				<b>-</b> *	
2.	Adhering to disinfection policies and procedures				
3.	Proper handling of biohazardous materials				
C. Per	form Quality Control Procedures		1	О	1
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. INITIATI	ON AND MODIFICATION OF INTERVENTIONS		3	22	25
	ntain a Patent Airway Including the Care of		o	3	3
	ficial Airways				
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				
	<ul> <li>c. esophagealtracheal tubes / supraglottic airways</li> </ul>				
	d. endotracheal tube				
	e. tracheostomy tube				
	f. laryngectomy tube				
	g. speaking valves				
	h. devices that assist with intubation, for				
	example,				
	endotracheal tube exchanger				
	<ul> <li>video laryngoscopy</li> </ul>				
4.	Performing tracheostomy care				
5.	Exchanging artificial airways				
6.	Maintaining adequate humidification				
7.	Initiating protocols to prevent ventilator-associated infections				
8.	Performing extubation				

Credential Maintenance Program	Items			
BOTO			nitive	
Respiratory Therapist Assessment		Le	evel	
Detailed Content Outline	Εt		In	To
Items are linked to open cells.	Ethics	Re	eg1	Totals
*Tost takers will be asked to integrate (analysis analysis) information	S	Recal	rati	S
*Test takers will be asked to integrate (apply or analyze) information.			ntegration*	
B. Perform Airway Clearance and Lung Expansion		0	1	1
Techniques		·		
Postural drainage, percussion, or vibration				
2. Suctioning, for example,				
• nasotracheal				
• oropharyngeal				
3. Mechanical devices, for example,				
high-frequency chest wall oscillation     with rate of CEP.				
<ul><li>vibratory PEP</li><li>intrapulmonary percussive ventilation</li></ul>				
insufflation / exsufflation				
4. Assisted cough, for example,				
• huff				
abdominal thrust				
5. Hyperinflation therapy				
6. Inspiratory muscle training				
C. Support Oxygenation and Ventilation		1	3	4
Initiating and adjusting oxygen therapy				
2. Minimizing hypoxemia, for example,				
• patient positioning				
secretion removal				
<ol> <li>Initiating and adjusting mask or nasal CPAP</li> </ol>				
Third Quarter of the Calendar				10
<ol> <li>Initiating and adjusting mechanical ventilation settings</li> </ol>				
a. continuous mechanical ventilation				
b. noninvasive ventilation				
c. high-frequency ventilation				
d. alarms				
5. Recognizing and correcting patient-ventilator				
dyssynchrony				
6. Utilizing ventilator graphics				
7. Performing lung recruitment maneuvers				
8. Liberating a patient from mechanical ventilation				
3 - F	ı		I	

Credential Maintenance Program	Items			
SAL BOADS			nitive	
Respiratory Therapist Assessment  Detailed Content Outline		L€	evel	
	Ethics	R	nte	Totals
Items are linked to open cells.	cs	Recal	grai	ıls
*Test takers will be asked to integrate (apply or analyze) information.		11	ntegration*	
D. Administer Medications and Specialty Gases		1	0	1
<ol> <li>Aerosolized preparations</li> </ol>				
a. antimicrobials				
b. pulmonary vasodilators				
c. bronchodilators				
d. mucolytics / proteolytics				
e. steroids				
2. Endotracheal instillation				
3. Specialty gases, for example,				
• heliox				
inhaled NO				
E. Ensure Modifications are Made to the Respiratory		0	8	8
Care Plan		0	O	0
<ol> <li>Treatment termination, for example,</li> </ol>				
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				

Credential Maintenance Program	Items			
BO42			nitive	
Respiratory Therapist Assessment		Le	evel	
Detailed Content Outline	Et		In	$T_{c}$
Items are linked to open cells.	Ethics	Re	[eg	Totals
MATORY *	S	Recal	rat	S
*Test takers will be asked to integrate (apply or analyze) information.			tegration*	
Fourth Quarter of the Calendar				10
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				
F. Utilize Evidence-Based Practice		0	1	1
Classification of disease severity				
<ol> <li>Recommendations for changes in a therapeutic plan when indicated</li> </ol>				
3. Application of guidelines, for example,				
ARDSNet				
• NAEPP				
• GOLD				
G. Provide Respiratory Care in High-Risk Situations		O	2	2
1. Emergency				
a. cardiopulmonary emergencies, excluding CPR				
b. disaster management				
c. medical emergency team (MET) / rapid				
response team				
2. Interprofessional communication				

Credential Maintenance Program	Items			
SAL BOADS		Cognitive		
Respiratory Therapist Assessment  Detailed Content Outline		Level		
Detailed Content Outline	Ethics	-	[nte	Totals
Items are linked to open cells.	ics	Recall	gra	als
*Test takers will be asked to integrate (apply or analyze) information.		all	Integration*	
3. Patient transport				
a. land / air between hospitals				
b. within a hospital				
H. Assist a Physician / Provider in Performing Procedures		0	4	4
1. Intubation				
2. Bronchoscopy				
3. Specialized bronchoscopy, for example,				
<ul> <li>endobronchial ultrasound (EBUS)</li> </ul>				
<ul> <li>navigational bronchoscopy (ENB)</li> </ul>				
4. Thoracentesis				
5. Tracheotomy				
6. Chest tube insertion				
<ol><li>Insertion of arterial or venous catheters</li></ol>				
8. Moderate (conscious) sedation				
9. Cardioversion				
10. Withdrawal of life support				
I. Conduct Patient and Family Education		1	O	1
Safety and infection control				
<ol> <li>Home care and related equipment</li> </ol>				
<ol><li>Lifestyle changes, for example,</li></ol>				
• smoking cessation				
• exercise				
4. Pulmonary rehabilitation				
<ol><li>Disease / condition management, for example,</li></ol>				
• asthma				
• COPD				
• CF				
tracheostomy care				
ventilator dependent				
Totals	1	10	30	40

<sup>\*</sup> Each test form will include 1 item that engages thinking about ethics to select the best answer.

<sup>\*</sup> This item also will

<sup>•</sup> include content from a task that shows an open cell under the *Ethics* column.

<sup>•</sup> be written to a cognitive level permitted for the task to which the item is linked.

Additional Specifications			
Patient Type	Maximum		
Pediatric — 1 month to 17 years of age	1		
Neonatal — birth to 1 month of age	1		
Adult or General	balance		
Total	40		

## **Item Codes and Keywords about Patient Conditions**

01- GENERAL 18- BARIATRIC

02- COPD 19- NEONATAL

03- ASTHMA 20- BRONCHIOLITIS

04- HEART FAILURE 21- NEUROMUSCULAR

05- POST-SURGICAL 22- PSYCHIATRIC

o6- GERIATRIC 23- CONGENITAL DEFECTS

07- CARDIOVASCULAR 24- CYSTIC FIBROSIS

08- INFECTIOUS DISEASE 25- BURN/INHALATION INJURY

og- PULMONARY VASCULAR DISEASE 26- LUNG TRANSPLANTATION

10- TRAUMA 27- APNEA

11- IMMUNOCOMPROMISED HOST 28- INTERSTITIAL LUNG DISEASE

12- NEUROLOGIC 29- DRUG OVERDOSE

13- ARDS 30- TRAUMATIC BRAIN INJURY (TBI)

14- PEDIATRIC 31- SEPSIS

15- DISORDERS OF PREMATURITY 32- LUNG CANCER

16- PULMONARY EMBOLISM

17- SHOCK