



# Announcement

The goal of the credential maintenance program is to strengthen the relationship between competencies of credential holders and expectations linked to those credentials. Participant feedback indicates credentialed practitioners find value and meaning in the assessments.

As an added value, we would like to share the list of **Most Missed Concepts** identified by the Credential Maintenance Program Assessments. It is our hope that this information will be useful to educators, managers, and practitioners while stimulating conversation or planning to address these gaps and to enhance understanding of important concepts impacting patient care.

## Most Missed Concepts on the 2024 Credential Maintenance Program Assessments

Someone credentialed in the Adult Critical Care Specialty is expected to recognize:

- No missed concepts were identified this year.

Someone credentialed in the Asthma Educator Specialty is expected to recognize:

- No missed concepts were identified this year.

Someone credentialed in the Neonatal / Pediatric Specialty is expected to recognize:

- When epiglottitis is suspected, the ETT sizes to be presented for intubation should be smaller than the size calculated from the patient's age.
- When a 28-week neonate has been improving while needing less support from mechanical ventilation with a low peak inspiratory pressure, the mandatory rate can be decreased even when the patient is triggering some breaths.

Someone credentialed in Pulmonary Function Technology is expected to recognize:

- Before analyzing an ABG sample that will include electrolyte values, the anti-coagulant in the sample syringe should be lithium heparin, rather than sodium heparin.
- According to the 2022 ERS/ATS technical standard on interpretive strategies for routine lung function tests, the percentage of bronchodilator responsiveness is calculated by subtracting the prebronchodilator FEV<sub>1</sub> from the postbronchodilator FEV<sub>1</sub>, then dividing by the predicted FEV<sub>1</sub>, and then multiplying by 100.

Someone credentialed in the Sleep Disorders Specialty is expected to recognize:

- No missed concepts were identified this year.

Someone credentialed in Respiratory Therapy is expected to recognize:

- The low PEEP alarm is routinely set 3-5 cm H<sub>2</sub>O below the set PEEP.