

## Respiratory Care Scope of Practice

**Prologue:** Respiratory Therapists are health care professionals responsible for the care of patients with deficiencies and abnormalities of the cardiopulmonary system. The scope of practice crosses all patient, client, resident populations, and care sites. This may include the following settings:

- Short-term acute care/hospital
- Emergency/urgent care
- Long-term acute care
- Sub-acute care
- Skilled nursing facilities
- Physician's offices
- Sleep labs
- Cardiac clinics and labs (e.g., cath labs)
- Hospital outpatient clinics
- Pulmonary clinics
- Respiratory outpatient clinics
- Primary care clinics
- Medical Industry
- Homeless shelters
- Patient's home

The practice of respiratory therapists is under the general direction of a physician (MD/DO). Respiratory therapists execute orders directed by licensed independent practitioners (e.g., physicians, advanced practice clinicians such as physician assistants, nurse practitioners) determined by state licensure laws where applicable. The practice typically focuses on:

- Patients across the age spectrum – neonatal through geriatric.
- Direct/indirect patient observation to include signs, symptoms, and reactions to therapeutic interventions.
- Monitoring of clinical and behavioral responses to respiratory care therapeutic and diagnostic interventions.
- Implementation of cardiopulmonary procedures, medical technology, diagnostic procedures, disease prevention, treatment management, and pulmonary rehabilitation.
- Utilization of protocols, guidelines, pathways, and policies driven by evidence-based medicine, expert opinion, and standards of practice.

- Participation in research to evaluate interventions and technology to determine their ability to define best practices and improve patient outcomes.
- Facilitation and direction of cardiopulmonary rehabilitation programs and the development of disease and care management plans, including but not limited to patient/home care caregiver education (e.g., disease and devices), pulmonary and cardiac rehabilitation programs, utilization of pulmonary disease navigation and/or telemedicine respiratory therapy consultants.
- Provision of patient and family education activities to promote knowledge and understanding of the disease process, medical therapy, and resources available to assist in the care of the patient.
- Facilitation of health care provider education that may include but is not limited to paramedics, EMTs, nurses, residents, medical students, fellows, and advanced practice providers that may include mentorship of student clinical rotations.
- Support of public education activities focused on the promotion of cardiopulmonary wellness and prevention that is sustainable (e.g., Breathe-zy Community education program, health fairs.)

The responsibilities of a respiratory therapist include, but are not limited to:

1. Performance and collection of diagnostic information
  - a. Pulmonary Function testing
  - b. Interventional diagnostic
  - c. Sleep studies
  - d. Noninvasive and invasive diagnostic procedures
  - e. Blood gas and other pertinent laboratory analysis
2. Patient assessment
  - a. Physical exam
  - b. Diagnostic data interpretation
3. Application of therapeutics to respiratory care
  - a. Medical gas therapy
  - b. Humidity therapy
  - c. High Flow Oxygen Therapy (HFOT)
  - d. Aerosol therapy (both with and without pharmacologic agents)
  - e. Artificial airway insertion, management, and care
  - f. Airway clearance therapy
  - g. Initiation and titration of invasive, non-invasive, and high-frequency (HFOV, HFJV, HFPV, etc.) mechanical ventilation.
  - h. Vascular catheter insertion, management, and care
  - i. Extracorporeal Life Support (ECLS)

- j. Hyperbaric oxygen therapy
  - k. Cardiology interventions (e.g., ECG, cath labs)
  - l. Lung ultrasound
4. Assessment of therapeutic interventions
  5. Disease management of acute and chronic diseases with and without clinical decision support systems.
  6. Discharge planning and case management
  7. Provision of emergency, acute, critical, and post-acute care, including, but not limited to:
    - a. Patient and environmental assessment
    - b. Diagnostic and therapeutic interventions (including the administration of pharmacologic agents)
    - c. Patient air and ground transport
    - d. In-hospital and interhospital transports
  8. Advanced care/end-of-life planning discussion facilitators.

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