

## Respiratory Therapist



### History

In 1957, a resolution to develop schools of inhalation therapy was introduced to the AMA House of Delegates by the Medical Society of New York. Following approval, the resolution was referred to the AMA Council on Medical Education (CME) and subsequently resulted in the *Standards (Essentials) for an Approved School of Inhalation Therapy Technicians*, which were formally approved by the AMA House of Delegates in 1962. The *Standards* were revised in 1967 and included the requirements of an 18-month program.

In 1970, the Board of Schools was reorganized and incorporated as the Joint Review Committee for Inhalation Therapy Education. In 1972, the *Standards* underwent a third revision, and additional standards were developed and approved for a shorter educational program for training individuals to function as technicians. Revised *Standards* were approved most recently in 2003.

In 1997, the review committee's name was changed to the Committee on Accreditation for Respiratory Care (CoARC).



### Career Description

Respiratory therapists work in a wide variety of settings to evaluate, treat, and manage patients of all ages with respiratory illnesses and other cardiopulmonary disorders. The advanced respiratory therapist participates in clinical decision-making and patient education, develops and implements respiratory care plans, applies patient-driven protocols, utilizes evidence-based clinical practice guidelines, and participates in health promotion, disease prevention, and disease management. The advanced-level respiratory therapist may be required to exercise considerable independent judgment, under the supervision of a physician, in the respiratory care of patients. In fulfillment of the advanced therapist role, the respiratory therapist may perform the following procedures:

- Acquiring and evaluating clinical data
- Assessing the cardiopulmonary status of patients
- Performing and assisting in the performance of prescribed diagnostic studies, such as obtaining blood samples, blood gas analysis, pulmonary function testing, and polysomnography
- Evaluating data to assess the appropriateness of prescribed respiratory care
- Establishing therapeutic goals for patients with cardiopulmonary disease
- Participating in the development and modification of respiratory care plans
- Performing case management of patients with cardiopulmonary and related diseases
- Initiating prescribed respiratory care treatments, evaluating and monitoring patient responses to such therapy, and modifying the prescribed therapy to achieve the desired therapeutic objectives
- Initiating and conducting prescribed pulmonary rehabilitation
- Providing patient, family, and community education
- Promoting cardiopulmonary wellness, disease prevention, and disease management
- Participating in life support activities as required and promoting evidence-based medicine, research, and clinical practice guidelines



### Employment Characteristics

Respiratory therapists are employed in a variety of settings that include acute care, chronic care, subacute care, extended care, and rehabilitation facilities; educational institutions; clinics; physician's offices; home care; sleep labs; diagnostic and research labs; and pharmaceutical companies.



### Salary

The Human Resources Study from the American Association for Respiratory Care (AARC) indicated that advanced level respiratory therapists with an RRT (Registered Respiratory Therapist) credential earned an average salary of \$57,803 in 2005. Data from the US Bureau of Labor Statistics for 2007 shows that wages at the 10th percentile were \$36,650, the 50th percentile (median) at \$50,070, and the 90th percentile at \$66,680 ([www.bls.gov/oes/current/oes292054.htm](http://www.bls.gov/oes/current/oes292054.htm)). For more information, refer to [www.ama-assn.org/go/hpsalary](http://www.ama-assn.org/go/hpsalary).



### Educational Programs and Credentialing

Respiratory therapists complete 2 or more years of formal training and education, leading to an associate, baccalaureate, or graduate degree. Credentialing exists at the entry and advanced levels; to qualify for the advanced credentialing examinations, graduates must first earn the entry-level credential. Almost all educational programs prepare students for advanced level exam eligibility, although a small number focus on only entry-level exam eligibility.

**Curriculum.** The knowledge and skills for performing these functions are achieved through formal college- or university-based programs of classroom, laboratory, and clinical preparation. Biological and physical sciences required include anatomy, physiology, chemistry, physics, microbiology, computer science, pharmacology, and pathophysiology. Coursework may also be required in mathematics, communications, psychology, medical ethics, and the social sciences. Professional coursework may include:

- Patient assessment, monitoring, and evaluation
- Diagnostic and therapeutic procedures
- Airway management and mechanical ventilatory support
- Infection control
- Basic and advanced life support
- Patient and caregiver education
- Rehabilitation and disease management
- Health promotion/disease prevention

Clinical training in all aspects of respiratory care applicable to pediatric, adult, and geriatric patients is also provided.



### Inquiries

#### Careers

American Association for Respiratory Care  
9425 N MacArthur Blvd, Suite 100  
Irving, TX 75063-4706  
972 243-2272  
[www.aarc.org](http://www.aarc.org)

**Licensure/Certification/Registration**

National Board for Respiratory Care  
18000 West 105th Street  
Olathe, KS 66061-7543  
913 895-4900  
[www.nbrc.org](http://www.nbrc.org)

**Program Accreditation**

Commission on Accreditation of Allied Health Education Programs  
(CAAHEP) in collaboration with:  
Committee on Accreditation for Respiratory Care (CoARC)  
1248 Harwood Road  
Bedford, TX 76021-0244  
817 283-2835  
817 354-8519 Fax  
[www.coarc.com](http://www.coarc.com)