



What is a Respiratory Therapist?

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Nemours Children's Health – Delaware Valley

Conflicts of Interest

- I have no conflicts of interest as they pertain to this presentation
- I just really want people to know about respiratory therapy

Objectives

- Review our stories in becoming a respiratory therapist
- Review what a respiratory therapist is and core responsibilities
- Review the training required to become an RT
- Discuss current scope and future scope of practice (APRT)
- Review environments in which RTs practice
 - Including specialty areas, homecare, sleep lab, neonatal, adults, outpatient, emergency, nonclinical roles, education, sales
- Review the pay structure
- Conclusion and questions

Jimmy's Story

- From Delaware
- High School → Delaware Army National Guard
 - Deployment to Afghanistan and some other places 2011
- Army
 - MEDEVAC Crew Chief
 - Introduced to the medical field
 - Nursing...NO THANKS!!



Mike's Story

- From Delaware
- High School AIDHC started out as Nursing Assistant
- Air Force
 - Medic in Iraq
 - Respiratory Therapy School
 - CCATT RT in Afghanistan
- Nemours RT
 - Staff RT
 - Emergency Dept Clinical Lead
 - Clinical Instructor & Patient/Family Educator

Medical Interest

- Something medical
 - Landed on respiratory therapy
- I wanted to be a decision-maker and use my skill set
- Cardiovascular sonography....meh
- Nursing....meh
- PT/OT....meh
- Perfect mix of fast-paced and downtime with critical thinking skills
- 0-100 FAST

Schooling

Jimmy

- Associates in Applied Science in Respiratory Care
 - Del Tech Wilmington
 - Clinicals at local hospitals
 - CCHS, ECC, Nemours, BayHealth
- Bachelor of Health Science
 - Wilmington University
 - Paid by Nemours
- Master of Health Science w/ con in Higher Education
 - Paid by Nemours

Mike

- Associates in Applied Science
 - USAF School of Uniformed Health Sciences
 - Clinicals at hospitals throughout the country
 - Texas, Ohio, Maryland, and Walter Reed
- Bachelor of Health Science
 - Wilmington University
 - Paid by the Air Force
- Starting Masters in Fall
 - Will be paid for by Nemours

Work History - Jimmy

- School was a lot, but rewarding
- Worked several jobs during AAS
 - Furniture, hardware, pet food, cemetery
- Graduated in 2016 with AAS
- Started as a new grad at Nemours
 - Per Diem 5 years
- CHOP Transport 6 months

- Back to Nemours
 - Nights ~ 1 year
 - EOW ~ 1 year
 - Clinical Lead- Cardiac Center 1.5 years
 - Clinical Instructor 1 year

Work History - Mike

- Started as Nursing Assistant with AIDHC (aka Nemours) 1999
- Considered Nursing, but joined Air Force Reserves in 2003
 - School to become a Medic NREMT
 - Deployed to Iraq (2006) After deployment, asked by Flight Surgeon to do RT school and become member of Critical Care Air Transport Team (CCATT)
 - RT school in 2007 2008; passed Respiratory Boards
- Nemours RT in 2008
- Deployed to CCATT in 2011
- Emergency Dept Clinical Lead 2013 2022
- Clinical Instructor in 2022 to present

What does a Clinical Instructor do

- Oversee all continuing education by RTs
 - Orientations
 - New equipment, new procedures
 - Teaching MDs, RNs, PT/OT, and all other disciplines
 - Teach mechanical ventilation
 - Coordinate conferences
 - Interview/hire new RTs
 - Adjunct professors for 7 schools
- Research

- Bench, animal, multi-center
- International and local presentations
 - AARC, DSRC, UMMC, ICON, ContinuEd
 - Present original research and speak as an expert on different topics in the world of respiratory care
- Interviews
- Lots of "courageous conversations"
- Lots of critical thinking and abstract problem solving
- BLS, PALS, NRP Instructor

Day to Day as a Staff RT

- Get report from the outgoing therapist
- See all patients that we are responsible for
- Extubate/intubate patients
- Kids coming back from OR
- Emergencies/Traumas
- Attend rounds
- Educate Families
- Educate each other
- Continue our own education



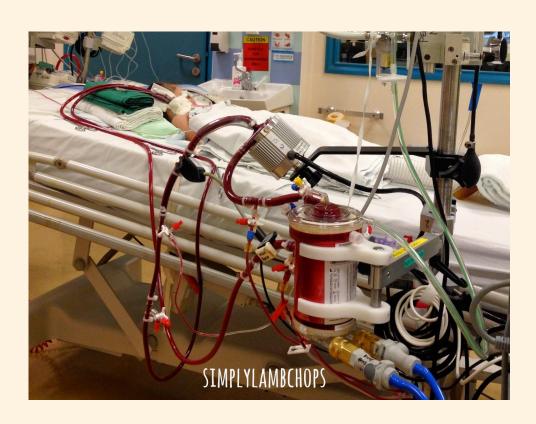
Equipment

- TONS of equipment
 - Ventilators
 - Critical care/acute care
 - Home care
 - anesthesia
 - HFNC
 - CPAP
 - BIPAP
 - ETTs

- ECMO
- Bronchoscopy
- IV pumps
- Nebulizers
- ACT equipment

The cool stuff...

- Bronchoscopies
- ECMO
- Deliveries
- Transports
- High-intensity, high acuity environment
- People depend on you!
 - Patients
 - RNs, MDs, families, coworkers
- Seeing kids get better is #1 This is why we are RTs



Teaching – Clinical Environment

- RTs are educators
 - Coworkers
 - Patients
 - Families
 - Doctors
 - Nurses
- Trach Program Mike

- Cystic Fibrosis
- Asthma
- Bronchopulmonary Dysplasia
- Bronchiolitis
- Heart Defects
- Ventilator Management
- Precepting is part of the job!

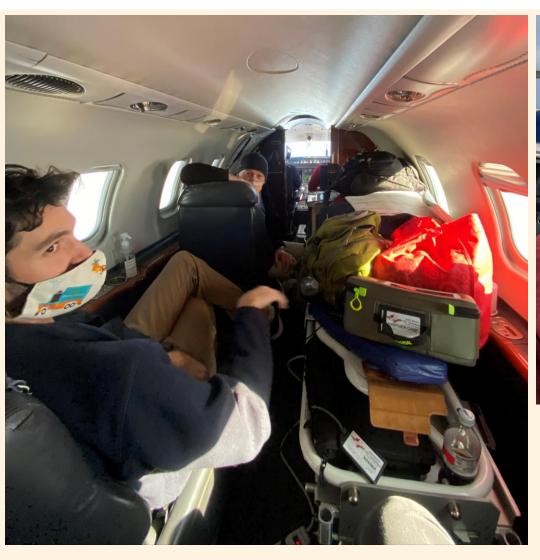
Education – In Classroom Environments

- The RT programs need teachers!
- Most of the local schools employ RTs with many years of experience at local hospitals
- CoARC accredited programs
- RTs teach RT
- They get to share knowledge and experience to help RT students develop into;-rounded clinicians
- We are adjunct professors for 7(!) respiratory care programs

Transports

- We work on transport teams
- In hospital and out of hospital
 - Ambulance
 - Helicopter
 - Plane
- During the transport, it's just you and the nurse
- High stakes
- High energy







Rotary Wing Transport

Fixed-wing transport

ECMO

- <u>Extracorporeal membrane oxygenation</u>
- Life support to the extreme
- Nemours is an ECMO center
- CCHS transfers and others from outside hospitals
- RTs can train to be ECMO specialists to sit and manage the pump during their shift
- 1:1 staffing ratio



Cardiac Center and & OR/Cath Lab

- Nemours-specific roles
- Only program like this in the country
- RTs act as anesthesia assistants
- Involved in all cardiac OR cases
 - From minor caths to OHTs
- We are cardiopulmonary experts
 - Heart AND lungs



Research

- We are a premier respiratory research institute
- Multiple national research projects and presentations
- 12+ abstracts last year
- Multi-Center Studies
- Bench studies
- Nemours Life Science Center



Sleep Lab

- Evaluate brain waves, eye and muscle movements to help diagnose sleep disorders
- Educate on how much sleep impacts overall health
- Provide CPAP/BIPAP to patients and titrate to meet their needs
- Help patients progress towards decannulation of tracheostomy



Outpatient Environment/PFT Lab

Perform breathing tests called spirometry or pulmonary function tests to diagnose lung disease

Provide hands on education to patients and families on:

- Asthma
- COPD
- Vaping/Smoking
- Cystic Fibrosis

Evaluate, treat, and escalate breathing issues based on direct patient assessment/observation

Assist physicians in making changes to patient care plan to benefit patients with tracheostomy:

- Ventilator changes
- Speaking valve trials
- Capping trials



Homecare

- RTs are needed at home!
- PromptCare is a local company
- Set up and manage home equipment
- Educate families



Industry/Sales

- Salespeople for ventilator, gas companies, and other medical device companies
- \$\$\$
- Requires expertise before entering sales
- Companies also have clinical specialists
- Get to attend all the conferences
- LOTS of travel



Non-Traditional Roles

- We have many RTs who are not bedside clinicians
- Finance
- Risk Management
- Data Analytics
- EMR EPIC
- Quality & Safety
- Cardiac Cath Lab
- Simulation`

APRT

- New mid-level providers
- First one in the country works in Baltimore
 - VAMC
- Roles/responsibilities
 - Wrote her own job description
 - Prescribe, perform procedures, order therapies

VA Maryland Health Care System Appoints Mindy Conklin as Advanced Practice Respiratory Therapist

JULY 5, 2023



Mindy Conklin, MRT, RRT-RCP

The VA Maryland Health Care System has named Mindy Conklin, MRT, RRT-RCP, as its first advanced practice respiratory therapist (APRT). She is also the first professional in this new allied health field to be hired within the Veterans Health Administration and in the world. In this role, Conklin will provide advanced respiratory care and pulmonary medicine to veterans enrolled in the local system. She will also conduct consultations and manage both inpatients and outpatients by assessing, diagnosing,

writing treatment plans, and serving as a physician extender specialist for patients suffering from cardiopulmonary disease.

The hard stuff...

- Sick kids
- Long hours on your feet/physically draining
 - 12-16 hour shifts
- Can be mentally draining
- High workloads
- Short staffing

- Emotionally taxing
 - Sick kids
 - Death
 - Poor outcomes
- You have to learn to lean on your coworkers
- Peer support

Training

- Attend and graduate from a CoARC accredited program
 - 1. BS vs AAS
- 2. Sit for the board exams administered by the NBRC
 - 1. Therapist Multiple Choice Exam (TMC)
 - 1. CRT vs RRT
 - 2. Clinical Simulation Exam (CSE)
- 3. Get a license to practice in each state you'll work in
 - 1. Compact licensure coming

- 4. Specialty exams and extra education
 - 1. RRT
 - 2. RRT-NPS
 - 3. RRT-ACCS
 - 4. RRT-SDS
 - 5. C/RPFT
 - 6. AE-C

Pay

- Depends on the geography and specialty
 - Big cities = big pay
 - Specialty location = bigger pay
- Current starting new grad pay is \$36.50
 - Plus shift differential (10-30%)
 - Credential Pay
 - Clinical Ladder
 - Benefits
- Per diem \$59.00

Professional Organizations

- Delaware Society for Respiratory Care (DSRC)
 - Junior Delegate Jimmy
 - Senior Delegate Mike
- American Association for Respiratory Care (AARC)
 - Judicial Committee
- Commission on Accreditation for Respiratory Care (CoARC)
 - Accreditation body for RT schools
- National Board for Respiratory Care
 - Credentialing body for respiratory care
 - Item Writer Neonatal/Pediatrics





How to find RT schools

- Delaware
 - Del Tech North
 - Wilmington
 - Del Tech South
 - Georgetown
 - Find an Accredited Program CoARC - Commission on Accreditation for Respiratory Care

- Pennsylvania
 - Millersville
 - West Chester
 - YTI
 - Thomas Jefferson University
- New Jersey
 - Rowan University

THANK YOU

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