

Examination Content	Class	Class	Class
I. PATIENT DATA EVALUATION	2013	2014	2015
1a. Review Date in Patient Record	50%	80%	79%
1b. Collect and evaluate Additional Patient Clinical Information	48%	64%	66%
1c. Recommend Procedures to Obtain Additional Data	74%	77%	59%
1d. Evaluate Procedure Results	N/A	N/A	43%
1e. Recommend Diagnostic Procedures	N/A	N/A	72%
II. EQUIPMENT MANIPULATION, INFECTION CONTROL, & QUALITY CONTROL			
2a. Manipulate Equipment by Order or Protocol	46%	70%	62%
2b. Ensure Infection Control	75%	80%	79%
2c. Perform Quality Control Procedures	90%	60%	75%
III. INITIATION AND MODIFICATION OF THERAPUETIC PROCEDURES			
3a. Maintain Records and Communicate Information	62%	78%	56%
3b. Maintain Patent Airway Including Care Artificial Airways	66%	70%	63%
3c. Remove Bronchopulmonary Secretions	66%	80%	65%
3d. Achieve Adequate Respiratory Support	42%	61%	70%
3e. Evaluate and Monitor Patient's Objective/Subjective Responses	61%	64%	64%
3f. Independently Modify Therapeutic Procedures	53%	62%	70%
3g. Recommend Modifications for Respiratory Care Plan/Responses	58%	69%	81%
3h. Determine the Appropriateness of Prescribed Care and Recommend Modifications	61%	83%	64%
3i. Initiate and Conduct or Modify Respiratory Care in ER	53%	73%	81%
3j. Act as an Assistant to Physician Performing Procedures	55%	85%	40%
3k. Initiate and Conduct Pulmonary Rehabilitation	55%	80%	97%

The scores identified are class results and based on the pass rate standard of 68%.

Class	Program /Curriculum Changes
2013	As a result of student performance changes were made in competencies in SLO's for RCP 102, 103, & 105 additional data review. SLO's RCP 105, 202, 203, and 204 a text was added for mechanical ventilation and protocols and ventilator management. Perkins funding sought to purchase "state of the art" mechanical ventilators Additional physician interaction organized during clinical rotations.
2014	Maintained previous curriculum changes and implemented the new ventilators into the lab setting with additional clinical simulations.
2015	The National Board for Respiratory Care had instituted a new examination which made SLO measurement impossible. We underwent a substantial change to RCP 204 curriculum to reflect the new testing competencies and SLO measurements.