

# CRITICAL ACCESS HOSPITALS

RESPIRATORY SERVICES					
Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
Is the type and scope of diagnostic and/or therapeutic respiratory services offered defined in writing and approved by the medical staff? C-0200 COP §485.618	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the type and amount of respiratory care services provided meet the needs of the patients served by the hospital? C-0200 COP §485.618	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are the respiratory care services delivered in accordance with acceptable standards of care? C-0200 COP §485.618	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are the respiratory services under the direction of a qualified physician member of the medical staff who has been appointed by the governing body? 19 CSR 30-20.136(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is the medical director responsible for implementing the rules of the medical staff governing the quality and scope of respiratory care services? 19 CSR 30-20.136(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are respiratory care services integrated within the total hospital plan? 19 CSR 30-20.136(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are all respiratory services administered under the direction of a licensed respiratory care practitioner or a registered nurse with relevant education and experience? 19 CSR 30-20.136(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If the director of respiratory care services is an RN, is a licensed respiratory care practitioner employed on a part-time consultant basis? 19 CSR 30-20.136(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are all respiratory care services: a. administered in accordance with the orders of a qualified and licensed practitioner? b. documented in the patient's medical record? 19 CSR 30-20.136(4)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		
Are respiratory care services administered by qualified personnel as specified by the medical staff? 19 CSR 30-20.136(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Do personnel administering respiratory services evaluate and reevaluate the therapy administered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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and document these evaluations in the medical record? 19 CSR 30-20.136(7)					
Are there written and approved policies that address at least: a. equipment assembly, operation, and preventive maintenance? b. handling, storage, and dispensing of therapeutic gases? c. cardiopulmonary resuscitation? d. procedures to follow in the advent of adverse reactions to treatments or interventions? e. pulmonary function testing? f. therapeutic percussion and vibration? g. bronchopulmonary drainage? h. mechanical ventilator and oxygenation support? i. aerosol, humidification, and therapeutic gas administration? j. administration of medications? k. procedures for obtaining and analyzing blood samples (i.e., arterial blood gases)? l. qualifications, including job title, licensure requirements, education, training and experience of personnel authorized to perform each type of respiratory care service and whether they may perform it without supervision? C-0200 COP §485.618	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are the written and approved policies and procedures reviewed and kept current per hospital policy? 19 CSR 30-20.136(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are these policies and procedures readily available to staff? 19 CSR 30-20.136(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is space, supplies and equipment adequate to meet the patients' needs? 19 CSR 30-20.136(8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is all equipment maintained to ensure patient safety? 19 CSR 30-20.136(8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is there a process for the review and evaluation on a regular basis of the quality and appropriateness of respiratory care services provided? 19 CSR 30-20.136(9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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If blood gases or other clinical laboratory tests are performed in the respiratory care unit, is there a current CLIA certificate? C-0200 COP §485.618	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**Key Resources and Links**

- [19 CSR 30-20.136](#)
- [COP §485.618](#)
- [COP §485.635](#)