

# **The Minnesota Society For Respiratory Care**

## **SPUTUM BOWL RULES OF COMPETITION**

**REVISED 2017**

- I. The prime objective of the Sputum Bowl is to stimulate interest in the current knowledge and practices of respiratory care.**
- II. The competition shall be held in a spirit of professionalism and good sportsmanship.**
- III. There are no losers in this contest. All should gain from this experience a greater understanding of respiratory care and themselves.**

### **IV. Submission of Teams**

- A. Each affiliate shall submit an application for admission to the contest prior to the deadline noted in these rules.
- B. Each affiliate shall submit a roster of team members prior to the deadline noted in these rules.

### **V. Sputum Bowl Team Composition**

- A. A team shall consist of at least three and not more than four (4) Respiratory Care students.
- B. Member Eligibility
  2. Team members (herein considered the team) must be current members in good standing of the American Association for Respiratory Care (AARC) as determined by current AARC bylaws.
  3. An individual may be a member on only one team entered in the state competition.
- C. Affiliate Team Eligibility
  1. Application for entrance in the Sputum Bowl competition at the St. Catherine's University job fair must be received by the Sputum Bowl Committee no later than **February 9<sup>th</sup>, 2018**.
  2. Submission of 100 oral questions and 16 visual questions shall be made to the Committee by **February 9<sup>th</sup>, 2018** to allow for proper review prior to the contest.

3. The team roster shall be submitted to the Committee by February 9<sup>th</sup>, 2018 to determine eligibility. No emergency roster changes will be accepted after February 14<sup>th</sup>, 2018.

## **VI. Format for State Competition**

- A. The student competition will be held after the St. Catherine's University job fair.
  1. Preliminaries will be held prior to the finals.
  2. Preliminaries will be of a double elimination format. Single elimination *may* be used if there are more than 5 teams competing.

## **VII. Moderators**

- A. The moderator shall have the power and option to accept or reject an answer without asking for a judge's ruling.
- B. The chairman of the Sputum Bowl Committee and moderator shall be responsible for the physical setup of the contest site, the proper functioning of all equipment, questions and all other necessary arrangements to ensure a smoothly run game.
- C. During the playing of the game, the moderator is in charge. He must control the actions of the teams, judges, scorekeeper, timekeeper and audience.
- D. The moderator shall review all questions prior to the competition to determine the limits of acceptable alternate responses to each question and determine sets of questions for use during each round of play.

## **VIII. Judges**

- A. The judges shall be qualified individuals in their respective fields.
- B. Judges may review the individual and team eligibility prior to and during the actual competition to determine if any irregularities exist.
- C. The judges shall not be directly related to team members involved in any individual contest.
- D. The judges impaneled for the competition shall rule on the response to any question when so desired by the moderator and indicate whether they accept or reject a team's answer. All decisions shall be final and no challenges will be accepted based on the judges' prior ruling.

## **IX. The Competition**

- A. Preliminaries
  1. A game will consist of:

- a. Two teams of up to three members each competing at a time.
- b. Ten (10) minutes in length
- c. The team scoring the most points at the end of ten minutes is the winner of that game.
- d. A team will be eliminated when losing two games during the preliminary competition. One game if using single elimination.

2. When a team fails to take their seats within five minutes of being called at the time of their game, they shall forfeit that game and be given a loss.

## B. Finals

1. A game will consist of:

- a. Two teams in competition
- b. Fifteen (15) minutes in length
- c. The team scoring the most points at the end of fifteen minutes is the winner of that game.

C. The moderator shall signal the beginning of each game.

D. The timekeeper shall time the length of play and announce the end of play.

E. The scorekeeper shall maintain a running score visible to all participants and audience and record the verbal portion of all match play.

F. The moderator will ask the pre-selected questions. Anyone may answer a toss-up question. The element of “**Risk/ Reward**” will exist throughout the entire game. If a team buzzes in to answer **before** the moderator has finished reading the question, the moderator will stop at that point in the question and indicate to that team that they are “At Risk”. The team then has ten (10) seconds to begin an answer. Team members have the liberty to confer during this time period. If the answer is correct, they are “Rewarded” with a point. If the answer is incorrect, a point will be deducted from their score. Then the moderator will turn to the opposing team, re-read the question and give that team ten (10) seconds to begin an answer. If that team is correct, they score a point. If they are incorrect, a point will **not** be deducted from their score. The moderator will judge the first answer given by any team as to its correctness, and if correct, indicate so to the scorekeeper.

- A team will never be “At Risk” if they respond to a question **after** the moderator has finished reading it.
- If they wish, each team, once per game, may use a lifeline called “**Ask an Expert**”.
- “Ask an Expert”

1. In competition, each team must submit the name of their “Expert” to the Sputum Bowl committee *prior* to the start of each game. The team may choose whomever they wish except anyone on the Sputum Bowl Committee or any judge who is presiding during the round. When a team responds to a question and wishes to use

the lifeline, they will announce to the moderator that they would like to ask their "Expert". The "Expert" must be readily available to join the team for the single question. The team will have 15 seconds total to begin an answer. "Risk/Reward" will apply when using your expert.

- G. If neither team responds to a question within ten seconds after the moderator has completed its reading, the question will be set aside and questioning will continue.
- H. Each correct answer to a question will have a value of one point.
- I. During the final two minutes of preliminary games and the final three minutes of finals contests, one point shall be deducted for each incorrect or incomplete primary response to a question. Teams responding to a question missed by the opposing team will not be subject to this penalty. This penalty phase begins with the first question started by the moderator after the moderator's announcement that the game is in the penalty phase.
- J. If, due to moderator error, a question must be thrown out after Team A has already missed it and before Team B has had a chance at the question, the very next question will be read to Team B which shall have ten seconds to respond within the rules. Any points lost by Team A on the first question (penalty phase) shall stand and Team B shall earn points on the next question based on their correctness. The moderator at all other times shall have the freedom to select questions in the order he/she sees fit and to throw out questions at any time he/she deems necessary.
- K. Tie games at the end of regulation play shall be resolved by a sudden death playoff. The first team to score three points shall be declared the winner. *"Risk/Reward" will apply but not "Ask the Expert" during the sudden death playoff.*
- L. Any question begun prior to the end of regulation play shall be completed in accordance with the above rules if either team has responded prior to the end of play. (Elapsed time to 0:00 as determined by the timekeeper.)

## X. Questions

- A. Each affiliate entering the competition shall submit 100 oral and 16 visual questions (see Appendix C).
- B. Questions used in competition will be of both the traditional oral and visual types. They will be reviewed and selected by the Sputum Bowl Committee prior to competition.
- C. Oral Questions.
  - 1. The questions will represent the level of didactic and clinical proficiency the respiratory care student is expected to possess.
  - 2. The questions will not be of either the true/false or multiple-choice format.
  - 3. The questions will be referenced to the list specified in Appendix A.
  - 4. The number of required questions in a given category are shown in the table below.

5. Each question shall be in Power Point format (see Oral Question Template).

#### D. Visual Questions

1. Each visual question shall consist of an image provided in Power Point format, with the question in the “Notes” section of the slide (see Visual Question Template).

**Please note:** The definition of a “visual question” is one that CANNOT be answered without seeing the picture associated with it. Questions that do not meet this definition are not “visual questions”.

2. There shall be one question from each of the 16 question categories (See Table below) and only one question per photograph.
3. The photographs submitted do not have to appear directly in the reference but the content of the question and answer shall be referenced to the list of textbooks and journals selected by the Sputum Bowl Committee (Appendix A). Please use reference list number and page number rather than title or author and page number. For journal citations, also use year and/or volume.
4. Subjects for visual questions should predominantly be items or scenes a typical respiratory care practitioner can reasonably be expected to recognize. The visual questions should require recognition or analysis of the visual image to compose a correct answer and not simply provide a visual background to a traditional, oral question. Please note the following criteria for visual question preparation:
  - a. Highly recommended
    - (1) Interesting scenes of any aspect of the actual practice of respiratory care by RCPs and/or RCP students.
    - (2) Realistic, staged illustrations of the practice of respiratory care
  - b. Acceptable
    - (1) Items of equipment
    - (2) Clear technical diagrams
  - c. Unacceptable
    - (1) Equations
    - (2) Slides consisting only of words
    - (3) Copyrighted photographs or cartoons
5. Teams submitting photographs depicting patients are expected to have obtained signed releases authorizing the use of the photographs in Sputum Bowl competition. These documents must be available upon request by the MSRC Sputum Bowl Committee. Note that it is not necessary to submit release forms with visual questions. Release forms should be obtained from your hospital or other employer.
- 6.

	<u>Oral Questions</u>	<u>Visual Questions</u>
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a. Anatomy and Physiology	10	1
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b. Diagnostics	10	1
c. Pathology	10	1
d. Acute Care	10	1
e. Mechanical Ventilation	10	1
f. Neonatal / Pediatrics	8	1
g. Airway Management	8	1
h. Gas Therapy	5	1
i. Microbiology	5	1
j. Pharmacology	8	1
k. Cardiopulmonary Rehab / Home Care	4	1
l. Chemistry/Physics	4	1
m. Humidity / Aerosol	4	1
n. Management	3	1
o. History	1	1
p. Patient Assessment	0	1

## **XI. Challenging the Competition**

- A. A team member may submit a protest form, challenging any portion of the competition within ten minutes after the completion of the game in which the protest is claimed.
- B. Team captains are asked to wait at the contest site for ten minutes after the completion of their game to learn of any protests relative to that contest.
- C. Protests will only be accepted for review if the protest will affect the outcome of the game **and** the protest is based on moderator error. Any protests concerning questions that the judges have already ruled on will not be accepted. The judges' rulings are *final*.

The Review Committee shall consist of:

1. Scorekeeper
2. Moderator
3. Timekeeper
4. Judges

D. Review shall consist of:

1. Team captains stating discrepancy and any or all supporting material or statements (limited to 5 minutes).
2. Any rebuttal from the opposing team captain (limited to 5 minutes).
3. Committee meeting and reviewing all material pertinent to the proceedings.

4. Final decision voted upon and decided by the majority of the Review Committee within one hour of the completion of that round of competition.

E. A team which has won a game in regular play cannot be declared the loser of that game as a result of a protest. Teams, which lose a game in regular play and as a result of the remedy applied to a successful protest would not lose, will play their opponent in a sudden death playoff per the rules contained in IX. K. above.

## APPENDIX A

<p>AMERICAN ASSOCIATION FOR RESPIRATORY CARE 2017 National Sputum Bowl Competition Reference List</p>
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American Association for Respiratory Care. Clinical Practice Guidelines. CPG's published through January 2016, available at <http://www.aarc.org>.

American Heart Association. Pediatric Advanced Life Support. 2015 Guidelines. <https://eccguidelines.heart.org/index.php/circulation/cpr-ecc-guidelines-2/part-11-pediatric-basic-life-support-and-cardiopulmonary-resuscitation-quality/?strue=1&id=2>

American Heart Association. Advanced Cardiac Life Support. 2015 Guidelines. <https://eccguidelines.heart.org/index.php/circulation/cpr-ecc-guidelines-2/>

Cairo J.M. Mosby's Respiratory Care Equipment. 9<sup>th</sup> edition. Elsevier (Mosby - Elsevier) Company. 2014

Beachey, W. Respiratory Care Anatomy and Physiology: Foundations for Clinical Practice (3<sup>rd</sup> ed.). St. Louis, MO: Elsevier (2013).

Buchbinder, S., & Shanks, K. Introduction to healthcare management. 3<sup>rd</sup> edition. Burlington, MA: Jones & Bartlett Publisher (2017).

Desjardins, T. and Burton, G. Clinical Manifestations and Assessment of Respiratory Disease. 7<sup>th</sup> edition. Elsevier (Mosby - Saunders) Company. 2016.

Gardenhire, D. Rau's Respiratory Care Pharmacology. 9<sup>th</sup> edition. Elsevier (Mosby - Saunders) Company. 2015

Global Strategy for the Diagnosis, Management and Prevention of COPD, Global Initiative for Chronic Obstructive Lung Disease (GOLD) 2017. <http://goldCOPD.org>

Guidelines for the Diagnosis and Management of Asthma, Summary Report 2007. National Asthma Education and Prevention Program, Expert Panel Report 3. <http://www.nhlbi.nih.gov/guidelines/asthma/asthsumm.pdf>

Hess, D. R., et al. Respiratory Care Principles and Practice. 3<sup>rd</sup> edition. Jones and Bartlett. 2015.

Heuer, A.J. & Scanlan, C. L. Clinical Assessment in Respiratory Care. 7<sup>th</sup> edition. Elsevier (Mosby - Saunders) Company. 2014.

Kacmarek, R., et al. The Essentials of Respiratory Care. 4<sup>th</sup> edition. Elsevier (Mosby - Saunders) Company. 2005

Kacmarek, R., Stoller, J., & Heuer, A. Egan's Fundamentals of Respiratory Care (11<sup>th</sup> ed.). St. Louis, MO: Mosby (2017).

Malley, W.J. Clinical Blood Gases: Assessment and Intervention. 2<sup>nd</sup> edition. Elsevier (Mosby -



Saunders) Company. 2005.

Oakes, D.F. Oakes' Practitioner's Pocket Guide to Respiratory Care. 9<sup>th</sup> edition. Health Educator Publications Inc. 2016

Pilbeam, S. Mechanical Ventilation. 6<sup>th</sup> edition. Elsevier (Mosby - Saunders) Company 2016.

Respiratory Care. The Official Journal of the American Association for Respiratory Care. July 2012 through June 2017.

Walsh, B., et al. Perinatal and Pediatric Respiratory Care 4<sup>th</sup> edition, Elsevier (Mosby - Saunders) Company. 2015.