

Respiratory Therapy

Event Category: Health Professions.....

Eligible Divisions: Secondary & Postsecondary / Collegiate	Round One: 50 Q test (60 minutes)	Digital Upload: NO
Solo Event: 1 competitor	Round Two: Skill(s) assessment	



New for 2026-2027

Editorial updates have been made.

TEXAS HOSA

Make sure to read TEXAS General Rules and Regulations for updated “Electronic Device Policies” and “Extended Stay Preparation”.

Area Spring Leadership Conference

Round one online test for Area will be given in December. The top ten (10) competitors will advance to round two (2) in person at the Area Spring Leadership Conference. The top three (3) scores in each Area will advance to State.

Texas State Leadership Conference

A Round 1 written exam will be used to slate the top ten (10) competitors for Round 2. Both Round 1 and Round 2 for State will be in person in Irving. The top three (3) scores from State will advance to ILC.

Event Summary

The respiratory therapy event allows individuals to gain the knowledge and skills required in respiratory therapy.. This competitive event consists of two rounds. Round One is a written, multiple-choice test and top-scoring competitors advance to Round Two for the skills assessment. This event aims to inspire HOSA members to learn more about respiratory careers, use critical thinking skills, and become allied health professionals who can respond and assist efficiently in clinical settings.

Sponsorship

HOSA- Future Health Professionals appreciates the sponsorship of this event by the [American Association for Respiratory Care](#). They have developed a [special landing page](#) for HOSA competitors and advisors.



General Event Information

General Rules	Competitors must be familiar with and adhere to the General Rules and Regulations .
Dress Code	Proper business attire or official HOSA uniform. Bonus points will be awarded for proper dress . • Round One: Proper business attire, official HOSA uniform, or attire appropriate to the occupational area. • Round Two: Attire appropriate to the occupational area.
Competitors Must Provide	• Photo ID for both rounds • Two #2 lead pencils (not mechanical) with eraser for the test.

	• Neon colored foam earplugs, NOT earbuds, for noise control (Rd1-optional) • Manual watch with second hand required for Round 2 for Vital Signs (no iWatches) • Non-latex gloves (2 pairs) • Gown • Goggles or safety glasses • Mask • Eye shield or face guard HOSA Conference Staff will provide equipment and supplies listed in Appendix I.
Official References	The references below are used in the development of the test questions and skill rating sheets: a. Stoller, J., Heuer, A., Chatburn, R., Mireles-Cabodevila, E., & Vines, D. <i>Egan's Fundamentals of Respiratory Care</i>. Elsevier. Latest edition b. Simmers, L., Simmers-Nartker, K., Simmers-Kobelak, S. & Morris, L. <i>DHO: Health Science</i>. Cengage Learning. Latest edition. c. American Association for Respiratory Care

ROUND ONE- Test

Test Instructions	All competitors will be given a test and answer sheet. The written test will consist of 50 multiple-choice items in a maximum of 60 minutes. See test instructions here .
Time Remaining Announcements	There will be NO verbal announcements for time remaining during ILC testing. All ILC testing will be completed in the Testing Center, and competitors are responsible for monitoring their own time.
Written Test Plan	The written test for Respiratory Therapy is: • Foundations of Respiratory Care- 20% • Applied anatomy & Physiology- 10 % • Assessment of Respiratory Disorder- 20% • Cardiopulmonary Diseases- 20% • Basic Therapeutics- 20% • Patient Education and Long-Term Care- 10%
Sample Test Questions	Sample Round One Test Questions 1. In what year did the CDC recognize AIDS? (Egan's pp 3) A. 1975 B. 1977 C. 1979 D. 1981 2. What is the term used for a test that accurately measures what it is intended to measure? (Egan's pp 396) A. Sensitivity B. Validity C. Specificity D. Reliability 3. What is the most common respiratory disorder in newborns? (Egan's pp 689) A. Transient Tachypnea of the Newborn B. Meconium Aspiration Syndrome C. Bronchopulmonary Dysplasia D. Persistent Pulmonary Hypertension of the Newborn

ROUND TWO- Skills Assessment

1. The top competitors from Round One will advance to Round Two. The number of advancing competitors will be determined by the scores obtained in Round One and the space and time available for Round Two. Round Two finalists will be announced on-site at ILC per the conference agenda.

2. Round Two is a selected skill(s) assessment. The Round Two skills approved for this event are:

Skill I: Basic Airway Management	4 minutes
Skill II: Donning & Removing Transmission-Based Isolation Garments	4 minutes
Skill III: Administering Oxygen via Nasal Cannula Without Humidification	6 minutes
Skill IV: Pulse Oximetry	4 minutes
Skill V: Assessment of Newborn	5 minutes
Skill VI: Measure and Record Vital Signs	8 minutes
Skill VII: Hand-held Nebulizer	8 minutes

3. For all skills, body fluids will be a simulated product.
4. The selected skill(s) will be presented to competitors as a written scenario at the beginning of the round. The scenario will be the same for each competitor. A sample scenario can be found [here](#). Some scenarios may involve the combination of multiple skills. If the event rating sheets are combined, it is not necessary to repeat a task a second time. An example would be competitors would not need to identify the patient twice.
5. Timing will begin when the scenario is presented to the competitors and will be stopped at the end of the time allowed. The scenario is a secret topic. Competitors MAY NOT discuss or reveal the secret topic until after the event has concluded or will face penalties per [the GRRs](#).
6. Competitors must complete all skill steps listed in the guidelines, even if the steps must be simulated/verbalized. (If the equipment is available, the competitors would complete all skill steps as the scenario warrants. The competitors will simulate/verbalize the steps if the equipment is unavailable.)
7. Judges will provide information to competitors as directed by the rating sheets. Competitors may ask questions of the judges while performing skills, if the questions relate to the patient's condition and will be included in the scenario or judge script.
8. Competitors must use all equipment correctly and safely. Judges will stop a student and not award points for a step if they see a competitor is about to cause a risk of harm or about to damage equipment or other supplies.

Final Scoring

1. The competitor must earn a score of 70% or higher on the combined skill(s) in Round Two-Skill Assessment in order to be recognized as an award winner at the ILC.
2. The final rank is determined by adding the round one test score plus the round two skill score. In the event of a tie, the highest test score will be used to determine the final placement.

Future Opportunities

The HOSA Scholarship program has funding available for HOSA members who have an interest in various health careers! The application process begins January 1, 2027, and can be found here: <https://hosa.org/scholarships/>.

Graduating from high school or completing your postsecondary/collegiate program does not mean your HOSA journey has to end. As a HOSA member, you are eligible to become a HOSA Lifetime Alumni Member- a free and valuable opportunity to remain connected, give back, and help to shape the future of the organization. Learn more and sign up at hosa.org/alumni.

Respiratory Therapy

Skill I: Basic Airway Management

Time: 4 minutes

Competitor #: _____ Division: _____ SS, _____ PS/C Judge's Signature: _____

*For use with unconscious patient (manikin) who is not breathing.

	Skill I: Basic Airway Management	Possible	Awarded
1.	Gathered equipment.	1 0	
2.	Washed hands or used alcohol-based handrub for hand hygiene and put on gloves.	2 0	
3.	Identified self.	2 0	
4.	Assessed for responsiveness.	2 0	
*Judge states, "Patient is not responding."			
5.	Performed Head Tilt Chin Lift:	2 0	
	a. Held the mandible with the middle and index finger of one hand.		
	b. Lifted the chin forward to displace the mandible anteriorly while tilting the head back with the other hand on the forehead.	2 0	
6.	Checked for breathing and pulse simultaneously for no more than 10 seconds.	2 0	
*Judge states, "Pulse is evident, no breathing noted."			
7.	Attached BVM to 100% O ₂ using the flowmeter.	2 0	
8.	Positioned self at the top of the patient's head or at the head of the bed.	2 0	
9.	Checked mask is working properly.	2 0	
10.	Applied mask tightly to the face using the "C-E" hold.	2 0	
11.	Manually ventilated.	2 0	
12.	Observed for chest rise and fall. If no chest rise, repositioned.	2 0	
13.	Ventilated every 5 to 6 seconds until airway adjunct is placed and chest rise evident.	2 0	
*Judge states, "Airway adjunct is placed."			
14.	Removed gloves.	2 0	
15.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
16.	Appropriately documented procedure in treatment notes.	2 0	
17.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
18.	Practiced standard precautions throughout skill.	2 0	
Total Points- Skill I:		37	
70% Mastery for Skill I: 25.9			

Respiratory Therapy

Skill II: Donning & Removing Transmission-Based Isolation Garments

Time: 4 minutes

Competitor #: _____ Division: _____ SS, _____ PS/C Judge's Signature: _____

	Skill II: Donning & Removing Transmission-Based Isolation Garments	Possible	Awarded
1.	Assembled equipment.	1 0	
2.	Removed any jewelry and if sleeves are long, pulled up sleeves.	2 0	
3.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
4.	Donning Gown:	2 0	
	a. Lifted the gown by placing the hands inside the shoulders.	2 0	
	b. Worked arms into the sleeves of gown by gently twisting (If sleeves are too long rolled the cuffs).	2 0	
	c. Placed hands inside the neckband and adjusted until in position and tied the bands at the back of the neck.	2 0	
	d. Secured gown at the waist with the ties.	2 0	
5.	Donning Mask:	2 0	
	a. Secure mask under the chin and covered mouth and nose.	2 0	
	b. Either placed elastic bands behind ears or tied mask securely behind head and neck by tying top ties first and bottom ties second.	2 0	
	c. Pinched at the nose to secure the mask.	2 0	
6.	Donning Gloves: Put gloves on and made sure that gloves covered the top cuff of the gown.	2 0	
*Judge states, "Skill completed."			
7.	Untied the waist ties and loosened the gown at the waist.	2 0	
8.	Removing Gloves:	2 0	
	a. Removed first glove by grasping the outside of the cuff with the opposite gloved hand and placed the glove over the hand so it is inside out.	2 0	
	b. Removed the second glove by placing the bare hand inside the cuff and pulled glove off so it is inside out.	2 0	
	c. Placed the gloves in the infectious waste container.	2 0	
	d. Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
9.	Removing Gown:	2 0	
	a. Untied the neck ties and loosened the gown at the shoulders handling only the inside of the gown.	2 0	
	b. Folded the gown in half and rolled together.	2 0	
	c. Placed gown in infectious waste container.	2 0	
10.	Removing Mask:	2 0	
	a. Untied bottom ties first followed by the top ties or removed from behind ears.	2 0	
	b. Held mask by top ties only and dropped into infectious waste container.	2 0	
	c. Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
Total Points- Skill II: 70% Mastery for Skill II: 30.1		43	

Respiratory Therapy

Skill III: Administering Oxygen via Nasal Cannula Without Humidification

Time: 6 minutes

Competitor #: _____ Division: _____ SS, _____ PS/C Judge's Signature: _____

Scenario will include method of administration and liter flow per minute (cannula only).

	Skill III: Administering Oxygen via Nasal Cannula Without Humidification	Possible	Awarded
1.	Obtained and reviewed physician's order (scenario).	2 0	
2.	Obtained needed equipment.	1 0	
3.	Washed hands or used alcohol based hand-rub for hand hygiene and put on gloves.	2 0	
4.	Approached, greeted, and identified patient using two patient identifiers.	2 0	
5.	Explained the procedure and obtained consent.	2 0	
6.	Connected the tubing from the oxygen supply to the tubing on the cannula.	2 0	
7.	Nasal cannula did not touch any surface.	2 0	
8.	Turned on the oxygen supply. (O ₂ may either be on a wall unit or portable Oxygen tank.)	2 0	
9.	Regulated the gauge to the correct liter flow.	2 0	
10.	Checked to be sure the oxygen is passing through the tubing by placing hand by the outlet on the cannula.	2 0	
11.	Washed hands or used alcohol based hand-rub for hand hygiene and put on disposable gloves.	2 0	
12.	With the oxygen flowing, applied nasal cannula.	2 0	
13.	Cannula:	2 0	
	a. Placed two prongs in the patient's nostrils pointing down and looped the tubing around each ear.	2 0	
	b. Adjusted the straps at the neck so the tips remain in position.	2 0	
	c. Instructed patient to take deep breaths through the nose.	2 0	
14.	Checked surrounding area to make sure all safety precautions are observed – no sparks or flames.	2 0	
15.	Removed gloves.	2 0	
16.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
17.	Appropriately documented procedure in treatment notes.	2 0	
18.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
19.	Practiced standard precautions throughout skill.	2 0	
Total Points- Skill III: 70% Mastery for Skill III: 28.7		41	

Respiratory Therapy

Skill IV: Pulse Oximetry

Time: 4 minutes

Competitor #: _____ Division: _____ SS, _____ PS/C Judge's Signature: _____
Skill will be performed with a portable pulse oximetry and probe.

	Skill IV: Pulse Oximetry	Possible	Awarded
1.	Obtained and reviewed physician's order (scenario).	2 0	
2.	Obtained needed equipment.	1 0	
3.	Washed hands or used alcohol-based hand-rub for hand hygiene and put on gloves.	2 0	
4.	Approached, greeted, and identified patient using two patient identifiers.	2 0	
5.	Provided privacy.	1 0	
6.	Explained the procedure and obtained consent.	2 0	
7.	Properly assembled equipment and tested equipment prior to patient application.	1 0	
8.	Equipment turned on and tested prior to use.	2 0	
9.	Examined the patient's fingers to make sure the nail beds are clear and the hands are not visibly soiled.	2 0	
10.	Pulse oximeter probe is placed on the finger.	1 0	
11.	Observed for an adequate waveform.	1 0	
12.	Assured measurement of the patient's oxyhemoglobin status (SpO ₂) and heart rate (Pulsatile).	1 0	
13.	Notified patient and appropriate personnel (judge) of SpO ₂ and verbalized if level is in normal range.	2 0	
14.	Removed and disposed of gloves.	2 0	
15.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
16.	Appropriately documented procedure in treatment notes.	2 0	
17.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
18.	Practiced standard precautions throughout skill.	2 0	
	TOTAL POINTS -- SKILL IV 70% Mastery for Skill IV = 21	30	

Respiratory Therapy

Skill V: Assessment of Newborn

Time: 5 minutes

Competitor #: _____ Division: _____ SS, _____ PS/C Judge's Signature: _____

	Skill V: Assessment of Newborn	Possible	Awarded
1.	Obtained needed equipment.	1 0	
2.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
3.	Put on disposable gloves.	2 0	
4.	Identified self to care team, mother, and any family members with mother.	2 0	
5.	Draped warm dry blanket over arms to receive infant.	2 0	
6.	Hugged infant to chest to prevent dropping the infant.	2 0	
7.	Placed infant in warmer in supine position.	2 0	
8.	Positioned head closest to competitor and in neutral position or slightly extended.	2 0	
9.	Used blanket to dry providing tactile stimulation.	2 0	
10.	As blanket becomes wet, removed and used dry blanket under infant to continue stimulation for one minute.	2 0	
11.	Inspected the chest and noted breathing pattern.	2 0	
*Judge will share information on the above from the script provided. If increased work of breathing go to step #12; if no increased work of breathing move to step #13.			
12.	Using a bulb syringe:	2 0	
	a. Squeezed the bulb prior to entering into the airway.	2 0	
	b. Entered bulb syringe into the mouth and released and cleaned.	2 0	
	c. Repeated steps 12 a & b above for both nares.	8 0	
13.	Used stethoscope to assess breath sounds and heart rate.	2 0	
*Judge states, "heart rate greater than 100 beats/min and respirations are adequate".			
14.	Assessed for muscle tone, infant response to stimuli, and infant skin color.	2 0	
* Judge will share information on the above from script provided.			
15.	Verbalized to the judge that the APGAR score was completed at 1 and 5 minutes.	2 0	
*Judge states, "The infant is stable."			
16.	Infant is wrapped in a dry towel and hat is placed on the head.	2 0	
17.	Ensured patient's safety and comfort.	2 0	
18.	Verbalized handed infant to appropriate personnel or mother (while handing infant to judge).	2 0	
19.	Removed and disposed of gloves.	2 0	

Skill V: Continued...		Possible	Awarded
20.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
21.	Appropriately documented procedure in treatment notes.	2 0	
22.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
23.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS – SKILL V Increased Work of Breathing 70% Mastery for Skill V Increased Work of Breathing= 38.5		55	
TOTAL POINTS – SKILL V Without Increased Work of Breathing 70% Mastery for Skill V Without Increased Work of Breathing= 30.1		43	

Respiratory Therapy

Skill VI: Measure and Record Vital Signs

Time: 8 minutes

Competitor #: _____ Division: _____ SS, _____ PS/C Judge's Signature: _____

	Skill VI: Measure and Record Vital Signs	Possible	Awarded
1.	Assembled equipment and supplies.	1 0	
2.	Washed hands or used alcohol-based handrub for hand hygiene and put on gloves.	2 0	
3.	Greeted patient and introduced self.	1 0	
4.	Identified patient using two patient identifiers.	2 0	
5.	RADIAL PULSE:	1 0	
	a. Positioned patient's hand and arm so they were well supported and rested comfortably with palm pointed downward.		
	b. Located the radial artery by placing middle and index finger toward the inside of the patient's wrist on the thumb side.	1 0	
	c. Exerted light pressure, counted for 30 seconds and multiply by 2 or count for full minute.	1 0	
6.	RESPIRATION:	1 0	
	a. Continued pulse position to keep patient unaware of counting.		
	b. Counted regular respirations for 30 seconds and multiply by 2 or count for a full minute (counting each expiration and inspiration as one respiration).	1 0	
7.	Verbalized pulse count and respiration count within +/- 2 of judge's count.	4 0	
8.	Described quality characteristics of pulse (volume – character strength, and rhythm - regularity) AND respirations (depth and rhythm) to judge.	4 0	
9.	Recorded pulse and respiration accurately on the graphic form.	4 0	
10.	BLOOD PRESSURE:	1 0	
	a. Placed the center of the cuff above the brachial artery.		
	b. Palpatory Systolic Pressure: Found radial pulse and fingers remained on radial pulse.	1 0	
	c. Closed valve on bulb, by turning clockwise.	1 0	
	d. Inflated the cuff until the radial pulse disappeared.	1 0	
	e. Continued to inflate cuff 30 mm Hg above this point.	1 0	
	f. Slowly released the pressure while watching the gauge.	1 0	
	g. When the pulse is felt again noted the reading (palpatory systolic pressure).	1 0	
	h. Correctly positioned earpieces of stethoscope in ears.	1 0	
	i. Palpated brachial artery.	1 0	
	j. Placed stethoscope over brachial artery.	1 0	

Skill VI: Continued...		Possible		Awarded
	k. Inflated the cuff to 30 mm Hg above palpatory systolic pressure.	1	0	
	l. Deflated the cuff by slowly turning the valve counterclockwise at an even rate of 2 – 3 mm Hg per second.	2	0	
	m. Continued deflating the cuff slowly and noted the first sound and the last sound.	1	0	
	n. Completely deflated the cuff and removed cuff from patient's arm and made patient comfortable.	1	0	
	o. Recorded blood pressure accurately on graphic form.	4	0	
	p. Replaced equipment appropriately.	1	0	
	q. Maintained accuracy within +/- 2 mm Hg of judge's reading of systolic pressure.	4	0	
	r. Maintained accuracy within +/- 2 mm Hg of judge's reading of diastolic pressure.	4	0	
11.	Washed hands or used alcohol based hand-rub for hand hygiene.	2	0	
12.	Executed all vital sign skills (pulse, respiration and blood pressure) smoothly and in logical order, overlapping skills to maximize efficiency of time.	1	0	
13.	Observed all checkpoints before leaving the patient: placed call signal within easy reach, lowered bed, positioned patient in good body alignment, and reported any changes to the nurse.	2	0	
14.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2	0	
15.	Practiced standard precautions throughout skill.	2	0	
TOTAL POINTS -- SKILL VI 70% Mastery for Skill VI= 42		60		

Competitor ID #

Graphic Chart for Skill VII

Attending Physician

Patient Name

Last Name:

First Name:

Date		0	0	0	1	1	2	0	0	0	1	1	2	0	0	0	1	1	2	0	0	0	1	1	2
Temp		0	0	0	1	1	2	0	0	0	1	1	2	0	0	0	1	1	2	0	0	0	1	1	2
		0	4	8	2	6	0	0	4	8	2	6	0	0	4	8	2	6	0	0	4	8	2	6	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	20																								
	10																								
Blood Pressure																									
Weight																									

Respiratory Therapy

Skill VII: Hand-Held Nebulizer

Time: 8 minutes

Competitor #: _____ **Division:** _____ SS, _____ PS/C **Judge's Signature:** _____

	Skill VII: Hand-Held Nebulizer	Possible	Awarded
1.	Obtained and reviewed physician's order (scenario).	2 0	
2.	Obtained needed equipment.	1 0	
3.	Obtained medication as ordered (per scenario).	2 0	
4.	Knocked and provided privacy.	2 0	
5.	Washed hands or used alcohol-based hand-rub for hand hygiene and put on gloves.	2 0	
6.	Approached, greeted, and identified patient using two patient identifiers.	1 0	
7.	Interviewed patient and obtained relevant history (home nebulizer use, any oxygen use at home).	1 0	
8.	Explained the procedure and obtained consent.	2 0	
9.	Performed baseline physiology assessment:		
	a. Pulse	2 0	
	b. Breath sounds and respiratory rate	2 0	
10.	Removed and disposed of gloves.	2 0	
11.	Washed hands or used alcohol-based hand-rub for hand hygiene and put on gloves.	2 0	
12.	Properly assembled equipment and tested equipment prior to patient application.	1 0	
13.	Prepared medication:		
	a. Accurately prepared prescribed medication.	2 0	
	b. Aseptically injected medication into delivery device.	2 0	
14.	Verbalized "Activated gas flow to meet manufacturers' flowrate requirement or as limited by gas source."	2 0	
15.	Selected mouthpiece/mask delivery system and connected to compressor.	1 0	
16.	Observed for aerosol before placing on or handing to the patient.	2 0	
17.	Handed nebulizer to patient or placed mask on patient.	1 0	
18.	Coached patient to breathe slowly through the mouth and hold breath after 5-6 regular breaths for 10 seconds.	1 0	
19.	Monitored patient for adverse response to treatment and noted if monitors show:		
	a. Patient's HR increased greater than 30 BPM - stopped.	2 0	
	b. Patient's RR increased to above 22 breaths per minute - stopped.	2 0	

	Skill VII: Continued...	Possible	Awarded
20.	Continued treatment until nebulizer begins to sputter.	1 0	
<i>*Judge states, "Nebulizer has begun to sputter."</i>			
21.	Removed nebulizer or mask prior to turning off the oxygen.	2 0	
22.	Turned off oxygen and encouraged patient to cough.	2 0	
23.	Asked patient how they feel.	2 0	
24.	Performed post assessment by checking the listening to breath sounds, respiratory rate and pulse rate.	2 0	
25.	Disassembled and rinsed the nebulizer with sterile water and air dried or discarded if soiled.	1 0	
26.	Removed gloves, and washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
27.	Appropriately documented procedure and response in treatment notes.	2 0	
28.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
29.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS -- SKILL VII 70% Mastery for Skill VII= 38.5		55	

Competitor ID # _____

HOSA HOSPITAL Treatment Notes

[illegible]