



July 2026

Dear CSRC Members, Respiratory Care Leaders, and Clinical Teams,

The California Society for Respiratory Care (CSRC) is proud to host the **2025 Practitioner Sputum Bowl Competition** at the annual **CSRC Tahoe Conference**. This exciting event will be held on **Thursday, October 8, 2025**, at Harrah's Lake Tahoe in Stateline, NV.

The competition is open to all licensed Respiratory Care Practitioners in California. Whether your team includes hospital-based clinicians, educators, or preceptors, this event celebrates clinical excellence, teamwork, and quick thinking. There are no prerequisites regarding prior competition placement—any team of eligible practitioners may register.

Due to time and space constraints, participation is limited to either:

- **8 teams** (single elimination format), or
- **4 teams** (double elimination format)

Teams will be accepted on a **first-come, first-served basis** once all required registration materials are received.

We look forward to an evening of camaraderie, competition, and clinical knowledge!

Sincerely,

Denise Marasigan & Mike Terry
CSRC Sputum Bowl Co-Chairs 2026

**California Society of Respiratory Care
Practitioner Sputum Bowl**

Rules of Competition

Origin July 2025 - Adapted from the 2025 AARC Sputum Bowl Rulebook

- 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 participants should gain from this experience a greater understanding of respiratory care and themselves.**
- IV. Submission of Teams**
 - a. Any team made up of eligible players may register to participate in the Practitioner Sputum Bowl.
 - b. Each team must submit the following information:
 - i. A completed application for admission to the contest must be submitted before the deadline noted in these rules.
 - ii. A completed roster of eligible team members is required before the deadline noted in these rules.
 - iii. Payment of the required registration fee.
 - c. Confirmation of a team's acceptance into the event will not be provided until all of the above is received and complete.
 - d. Registrations are confirmed on a first-come, first-served basis and are limited to those that are fully completed.
- V. Sputum Bowl Team Composition**
 - a. A team shall consist of at least two (2) and not more than four (4) licensed Respiratory Care practitioners. NOTE: Only three members can compete as the core team in any one match, but team members may alternate between matches.
 - b. Member Eligibility
 - i. Team members (herein considered "the team") must be current members in good standing of the California Society of Respiratory Care (CSRC) as determined by the current CSRC bylaws at both the time of team application and at the time of the competition.
 - ii. An individual may be a member of only one team that enters the competition.
 - iii. Each Practitioner Sputum Bowl team member must be a licensed Respiratory Care professional. The licensed practitioner status of each team member must be verified and confirmed by the team's designated representative on the Practitioner Sputum Bowl roster, which must be submitted to the CSRC Sputum Bowl committee by the stated application deadline.
 - c. Team Eligibility
 - i. Teams must meet all requirements of a Sputum Bowl team as outlined in these rules.

- ii. Teams must submit a completed application to play, team roster, and payment of a \$100 non-refundable registration fee before the deadline established in these rules.
- iii. Teams may consist of licensed practitioners from different institutions, facilities, or regions, as long as all other eligibility requirements are met.

VI. Format for State Competition

- a. The practitioner competition will be held during the CSRC Northern California Conference.
 - i. Preliminaries will be held before the Finals.
 - ii. Preliminaries will be held in a double-elimination format and follow a pre-created game bracket.
 - iii. Preliminary bracket play will occur until only 4 teams remain. The remaining 4 teams will advance to the Finals.
 - iv. Team matches will be paired using a randomization program.

VII. Moderators

- a. A moderator shall be familiar with the profession's terminology and appointed by the Sputum Bowl Committee Chair.
- b. The moderator shall have the power and discretion to accept or reject an answer without seeking a judge's ruling.
- c. The Committee Chair and moderator shall be responsible for the physical setup of the contest site, the proper functioning of all equipment, the handling of questions, and all other necessary arrangements to ensure a smoothly run game.
- d. During gameplay, the moderator is in charge. They must control the actions of the teams, judges, scorekeepers, timekeepers, and audience.
- e. The moderator shall review all questions before 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 individual and team eligibility before and during the competition to determine whether 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 asked 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
 - i. A game will consist of:
 - 1. Two teams of up to three members each competing at a time.
 - 2. Ten (10) minutes in length
 - 3. The team scoring the most points at the end of ten minutes is the winner of that game.
 - 4. A team will be eliminated when losing two games during the preliminary competition.
 - ii. If a team is not on time for their scheduled game, the team that is present will be seated. At the time the game is scheduled to start, a 60-second clock will start. If

the missing team does not arrive before the clock expires, the team present will be given a win with a score of 1-0. Under extenuating circumstances, the committee will discuss and vote on whether a team is permitted to play.

- iii. No technology of any kind permitted on stage unless approved by the sputum bowl committee (e.g., smartphones, smartwatches, AI glasses, etc.).

b. Finals

- i. A game will consist of:
 - 1. Two teams in competition
 - 2. Ten (10) minutes in length for the semi-finals, fifteen (15) minutes in length for the Finals match.
 - 3. The team scoring the most points at the end of each game is the winner.
 - ii. The final four teams will be paired at random and will compete for berths in the championship game.
 - iii. Teams that lose their first game in the final competition will be awarded third place.
 - iv. The winner of the championship game will be awarded first place. The loser of the championship match will be awarded second place.
- 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 the 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 pause at that point 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. The moderator will then 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, no points will 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.
- g. A team will never be “At Risk” if they respond to a question after the moderator has finished reading it. The time clock will then be set to ten (10) seconds. The team will have ten (10) seconds total to begin an answer. If the time to answer the question has passed, the moderator may move on to the opposing team and read it again. If both teams have been read the question, the moderator will proceed on with the round.
- h. If neither team responds to a question within ten (10) seconds after the moderator has completed its reading, the question will be set aside, and questioning will continue.
- i. Each correct answer to a question is worth 1 point.
- j. After the 2:00-minute mark (or 3:00-minute mark in Finals), no slide questions will be asked.
- k. Bonus/Penalty Phase
- i. There will be a Bonus Phase during the last two minutes of preliminary play and during the last three minutes of Finals play. A team that buzzes in first with a correct answer will receive 2 points (bonus). A team that buzzes in first with an incorrect answer will have 1 point deducted (penalty). If the first team to buzz in is incorrect, that team will lose a point, and the second team will then have an opportunity to

answer the question. IF correct, the second team will earn 1 point. If incorrect, no points will be deducted.

- l. 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 to answer, the very next question will be read to Team B, who shall then have ten (10) seconds to respond within the rules. Examples in which the situation mentioned may occur include a poorly worded question read by the moderator that elicits an incorrect answer from Team A due to the wording, or the moderator recognizing that the question has already been presented. The moderator will state the question is being thrown out and instruct the scorekeeper how to adjust the score, if needed, and the timekeeper when to resume the time. 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 sees fit and to throw out questions at any time as deemed necessary.
- m. 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 during the sudden-death playoff.
- n. Any question begun before the end of regulation play shall be completed in accordance with the above rules if either team has responded before the end of play. (Elapsed time to 0:00 as determined by the timekeeper).

X. Questions

- a. The questions used in the competition will be of both the traditional oral and visual types. They will be reviewed and selected by the Sputum Bowl Committee before competition.
 - i. The questions will represent the level of didactic and clinical proficiency the respiratory care practitioner is expected to possess.
 - ii. The questions will not be of either the true/false or multiple-choice format.
 - iii. The questions will be referenced to the list specified in Appendix A.

XI. Challenging the Competition

- a. Team captains are asked to wait at the contest site for two minutes after their game to learn of any protests regarding that contest.
- b. Protests will only be accepted for review if they will affect the outcome of the game and are based on a moderator error. Any protests concerning questions the judges have already ruled on will not be accepted. The judges' rulings are final.
- c. A team member may submit a protest form within two minutes of the game's completion. The team captain must obtain the protest form from the Sputum Bowl Chair. The form must be completed and returned to the Sputum Bowl Chair by the team captain by the end of the following match.
- d. Any Sputum Bowl Committee references are on-site for use by the Committee and judges only.
- e. The Review Committee shall consist of:
 - i. Scorekeeper
 - ii. Moderator
 - iii. Timekeeper
 - iv. Judges
- f. Review shall consist of:

- i. Team captains stating discrepancy and any or all supporting material or statements (limited to 5 minutes).
 - ii. Any rebuttal from the opposing team captain (limited to 5 minutes). Committee meeting and reviewing all material pertinent to the proceedings.
 - iii. The final decision is voted upon and decided by the majority of the Review Committee within 10 minutes of the completion of that match.
- g. A team that won a game in regular play cannot be declared the loser of that game due to a protest. Teams, which lose a game in regular play and, because of the remedy applied to a successful protest, would not lose, will play their opponent in a sudden-death playoff.

XII. Electronic Systems

- a. The device shall be constructed to provide the following:
 - i. Hand switches for each contestant.
 - ii. Indicator system to show which team has responded first.
 - iii. Timer mechanisms to time responses: 10 seconds for initial responses, and 10 seconds when the question is given to the opposing team.
 - iv. Reset device for timekeeper to reset system in preparation for the next question.
- b. The timekeeper shall be the person in control of the device and shall have a thorough working knowledge of the device.
- c. In the case of an electronic malfunction, any Sputum Bowl Committee member or judge shall immediately notify the moderator, who will call time. The game clock shall be reset to the time when the malfunction was first noticed. The question in progress shall be thrown out. The moderator shall signal time in and begin with a new question. No points may be awarded on the question thrown out, nor may they be deducted if in the penalty phase. Before restarting play, the moderator shall ensure all systems are operational and clear.
- d. In keeping with the CSRC annual meeting policy, no recording devices of any kind will be permitted during contests.

XIII. Competition Decorum

- a. Participants are expected to display a professional and ethical decorum throughout the competition.
- b. Participants must comply with competition rules as outlined above, refraining from recording the games, mouthing/whispering answers to on-stage competitors, and otherwise violating the spirit of good competition.
- c. No alcoholic beverages of any kind are permitted at the competition table during game play.
- d. Participants violating these rules may be disqualified from the competition.

APPENDIX A
CALIFORNIA SOCIETY FOR RESPIRATORY CARE
Practitioner Sputum Bowl Competition
Suggested Reference List – Updated July 2025

1. American Academy of Pediatrics. (2021). Textbook of neonatal resuscitation (8th edition). American Academy of Pediatrics.
2. American Association for Respiratory Care. (2023, November 20). Evidence-based clinical practice guidelines. Clinical Practice Guidelines. <https://www.aarc.org/resources/clinical-resources/clinical-practice-guidelines/>
3. American Heart Association. (2020). Advanced cardiac life support 2020 guidelines. American Heart Association.
4. American Heart Association. (2020). Pediatric advanced life support 2020 guidelines. American Heart Association.
5. Beachey, W. (2022). Respiratory care anatomy and physiology: Foundations for clinical practice (5th edition). Elsevier.
6. Buchbinder, S.B., Shanks, K., & Kite, B.J. (2020). Introduction to healthcare management (4th edition). Jones & Bartlett Learning.
7. Cairo J.M. (2021). Mosby's respiratory care equipment (11th edition). Elsevier.
8. Cairo, J.M. (2023). Pilbeam's mechanical ventilation: Physiological and clinical applications (8th edition). Elsevier.
9. Des Jardins, T., & Burton, G.G. (2023). Cardiopulmonary anatomy & physiology: Essentials for Respiratory Care (7th edition). Elsevier.
10. Des Jardins, T., & Burton, G.G. (2023). Clinical manifestations and assessment of respiratory disease (9th edition). Elsevier.
11. Gardenhire, D.S. (2023). Rau's respiratory care pharmacology (11th edition). Elsevier.
12. Global Initiative for Chronic Obstructive Lung Disease. (2024). Global strategy for the prevention, diagnosis and management of COPD: 2024 report. Gold Reports. <https://goldcopd.org/2024-gold-report/>
13. Global Initiative for Asthma. (2023). 2023 GINA report, global strategy for asthma management and prevention. GINA Reports. <https://ginasthma.org/2023-gina-main-report/10>
14. Hess, D.R., MacIntyre, N.R., Galvin, W.F., & Mishoe, S.C. (2020). Respiratory care: Principles and Practice (4th edition). Jones & Bartlett Learning.
15. Heuer, A.J. (2022). Wilkins' clinical assessment in respiratory care (9th edition). Elsevier.
16. Oakes, D., & Jones, S. (2021). Oakes' respiratory care pocket guide (10th edition). Health Educators Publications, Inc.
17. Stoller, J.K., Heuer, A.J., Chatburn, R.L., Mireles-Cabodevila, E., & Vines, D. L. (2024). Egan's fundamentals of respiratory care (13th edition). Elsevier.
18. Respiratory Care. The Official Journal of the American Association for Respiratory Care. July 2020 through July 2025.
19. U.S. Department of Health and Human Services. (2020). 2020 Focused updates to the asthma management guidelines: A report from the National Asthma Education and prevention program coordinating committee expert panel working group. <https://www.nhlbi.nih.gov/resources/2020-focused-updates-asthma-management-guidelines>
20. Walsh, B. (2022). Neonatal and pediatric respiratory care (6th edition). Saunders.

APPENDIX B
Question Categories and Percentages

1. Anatomy & Physiology 9%
2. Diagnostics 9%
3. Pathology 9%
4. Mechanical Ventilation 9%
5. Neonatal/Pediatrics 5%
6. Airway Management 5%
7. Pharmacology 5%
8. Gas Therapy 5%
9. Acute/Critical Care 5%
10. Humidity/Aerosol 5%
11. Microbiology 5%
12. Chemistry/Physics 5%
13. Patient Assessment 5%
14. Bronchial Hygiene 5%
15. Patient Safety 3%
16. Management 3%
17. Cardiopulmonary Rehab 3%
18. Home Care/Long Term Care 3%
19. History 2%
20. General Pop Trivia