



PATIENT ASSESSMENT

INFORMATION GATHERING

PROBLEM OR THERAPEUTIC OBJECTIVE ORIENTATION

- **What problem are you assessing for?**
- **What is the therapeutic objective of the therapy the patient is getting or will get?**

PROBLEM YOU ARE ASSESSING FOR?

- **WHAT IS THE CAUSE OF THE PATIENT'S APPEARENT RESPIRATORY DISTRESS?**
- **WHAT THERAPY DOES THE PATIENT REQUIRE?**

SIGNS OF RESPIRATORY DISTRESS

- **RESPIRATORY FREQUENCY**
- **HEART RATE**
- **USE OF ACCESSORY MUSCLES**
- **ABNORMAL BREATH SOUNDS**
- **LEVEL OF CONSCIOUSNESS**
- **COLOR**
- **APPEARENCE**
- **AMOUNT, COLOR & CONSISTENCY OF SPUTUM.**

SYMPTOMS OF RESPIRATORY DISTRESS:

- **PATIENT EXPRESSES COMMENTS ABOUT BREATHING.**
- **PATIENT COMMENTS ABOUT SPUTUM PRODUCTION.**
- **PATIENT COMMENTS ABOUT THERAPY.**
- **PATIENT COMMENTS ABOUT HEART RATE, CHEST PAIN OR OTHER CARDIAC SYMPTOMS.**

DATA ORGANIZATION METHOD

- **S = Subjective**
VS
- **O = Objective**

SUBJECTIVE:

- **DATA ABOUT HOW THE CONDITION OR PROBLEM IS PERCEIVED BY THE PAIENT OR OTHER HEALTH CARE PROVIDERS.**
- **USUALLY A QUALITATIVE(HARD, GOOD, PRODUCTIVE) NOT A QUANTITATIVE(RR = 22, HR = 150) STATEMENTS.**

SUBJECTIVE:

- **CONSIDERED SOFT DATA.**
- **CAN BE USED TO CORRELATE WITH OTHER PATIENT DATA.**
- **SHOULD NOT BE DISCOUNTED.**
- **SHOULD BE PURPOSEFULLY COLLECTED.**
- **USED WITH THE VERB FORMS “APPEARS TO AND SEEMS TO”.**

OBJECTIVE:

- **DATA THAT CAN BE GATHERED REPETITIVELY AND CONFIRMED BY DIFFERENT PRACTITIONERS.**
- **OBJECTIVE DATA IS THE QUANTITATIVE (RR = 22, HR = 150) TYPE, MEASURABLE, NO VALUE JUDGEMENTS.**
- **CONSIDERED HARD DATA.**
- **CORRELATE WITH SUBJECTIVE DATA.**

DATA ORGANIZATION METHOD

- **S = Subjective**
- **O = Objective**
- **A = Analysis**
- **P = Plan**

ANALYSIS:

- **SIGNIFICANCE OF VALUES FOR PURPOSE OF DECIDING ON NEXT COURSE OF ACTION.**
- **REQUIRES ID OF CHANGE(OR COMPARISON TO NORMAL) & RELATIONSHIP TO PROBLEM OR THERAPY.**
- **WHAT IS PATIENT TREND:**
 - **UNCHANGED**
 - **IMPROVED**
 - **DETERIORATED**

PLAN:

- **YOUR SUGGESTION FOR PROCEEDING WITH SOLVING THE PATIENT'S PROBLEM OR ACHIEVING THE THERAPUETIC OBJECTIVE.**
- **CONTINUE R_x UNCHANGED, MODIFY THERAPY, DISCONTINUE THERAPY**
- **WILL DISCUSS ALTERNATE/ ADDITIONAL RX WITH PHYSICIAN.**

Therapeutic Objectives

- **Oxygen RX**
- **Bronchial Hygiene**
- **Aerosol**
- **SMI Rx**

Indicators of Effectiveness

- **ABGs**
- **PFTs**
- **NIPs**
- **LAB**
- **SPUTUM**
- **VITAL
SIGNS**
- **CHANGE
IN
VALUES**

Match Indicators of Effectiveness to Problem or Therapeutic Objective

- **PROBLEM:**
 - WHAT INDICATES RESPIRATORY DISTRESS, DOES IT MATCH SUBJECTIVE AND OBJECTIVE DATA?
- **THERAPUETIC OBJECTIVE:**
 - BASED ON THE T.O., IS THERE MATCHING SUBJECTIVE AND OBJECTIVE DATA INDICATING EFFECTIVENESS?

MATCHING : t.o.

- Improve patient's PaCO₂ and Ph
- Improve patient's bronchial hygiene
- Improve patient's tissue oxygenation
- Reduce patient's WOB
- Prevent Aspiration
- Prevent post-op pneumonia
- Reverse bronchospasm

ASSESSMENT ALGORITHM

Patient Problem or Therapy Objective ID

Collect Patient Information: SO

Perform Analysis: Match Data to TO or PP

Develop Plan, Communicate, Implement

TAKE A BREAK!

