I. Purpose:
Patient assessment is performed to confirm the appropriateness of therapy, to assess the patient's previous and current respiratory status, to evaluate the patient's response to therapy, to prioritize patient care, and to prepare or alter patient care plans.

II. Policy:
1. All respiratory care therapy must be ordered by a licensed, privileged physician.
2. Competent LRCP- Licensed Respiratory Care Practitioner (LRCP) personnel will perform a limited patient evaluation, immediately initiate therapy, and document the patient's response to therapy.
3. The LRCP Supervisor will perform an expanded patient evaluation if consulted by a LRCP or if ordered by a physician.
4. The LRCP Supervisor will perform appropriate and prompt communication with the prescribing physician if there are questions about the application or response to therapy.
5. The LRCP Supervisor will consult the Medical Director when the patient is not progressing satisfactorily due to inappropriate therapy or failure of communication with the prescribing physician.
6. The LRCP will perform and document a limited evaluation of objective and subjective response prior to, during, and following therapy at each subsequent bedside visit.
7. The LRCP will document the patient's classification status at least once per shift.
8. The LRCP will complete patient assessment for each initial therapy start and during every shift. Assessment of pain and assessment of fall risk will be completed at these times also.
9. Documentation of limited patient assessment should include medication dose and/or therapy type, time of therapy/assessment, measured responses: vital signs, breath sounds, lung function (if applicable), patients' progress, and the patient's ability to self-assess and communicate with the health professional.
10. Limitations may include difficulty interpreting subjective information and the patient's inability to optimally perform maneuvers.
11. Contraindications are minimal, however, expanded assessments should be postponed when patients who are in severe distress.
12. Hazards and complications are those associated with specific assessment procedures.
13. Universal precautions are recommended when performing patient assessment. Manufacturers' recommendations should be followed when cleaning and sterilizing equipment used during an assessment.
14. Single-patient-use materials will be utilized when available.

III. Scope
Licensed Respiratory Care Practitioner
SUBJECT: Patient Assessment

Supervising Respiratory Therapist
Medical Director
Adult and Pediatric Emergency Care
Adult and Pediatric Critical Care
Adult and Pediatric Medical/Surgical Care
Adult and Pediatric Specialty Areas

IV. Equipment
Stethoscope
Watch with a second hand
Pulse oximeter
Patient monitoring tools as indicated

V. Procedure for Patient Assessment
1. Review the chart for
   A. Diagnosis
   B. physician orders
   C. criteria and objectives
   D. smoking history
   E. latest chest x-ray report
   F. latest arterial blood gas or arterial saturation value
   G. tobacco cessation intervention
   H. thoracic surgery
   I. cardiac history
   J. general history
   K. home-regimen respiratory medications
   L. environmental, social, and occupational factors
   M. current height
   N. idea body weight
   O. body temperature
   P. pulse
   Q. respiratory frequency
2. Auscultate the chest
3. Observe the patient for
   A. irregular or increased work of breathing
   B. best cough effort
   C. sputum characteristics
   D. anatomical and neurological status
   E. pain
   F. fall precaution status
4. Make respiratory therapy recommendations based on the assessment
5. Document
   A. assessment findings
   B. objectives of therapy
   C. patient classification status

V. Definition
LRCP- Licensed Respiratory Care Practitioner