(A) Policy Statement

Respiratory Care Patient Assessment will be utilized for all adult floor and step-down status patients with physician ordered respiratory care. All adult floor and step-down patients will be assessed for appropriateness of ordered respiratory care with the start of therapy.

(B) Purpose of Policy

The assessment process optimizes patient care by providing an objective, on-going respiratory assessment consisting of objective scores from several different medical record criteria.

When the scores are added, an assessment triage level, with a suggested respiratory treatment frequency, can be determined. A notation placed in the Progress Notes of the patient's medical record allows the RCP to suggest, directly to the physician, changes in therapy based upon established criteria.

This direct assessment of the patient, and review of the medical record, helps to assure optimization of staff resources and therapeutic modalities.

(C) Procedure

1. All adult floor and step-down patients will be assessed within 8 hours of the order being received, for appropriateness of physician ordered respiratory care, with the start of therapy.

2. Reassessment of patients will be provided every 72 hours for levels 1-4 and PRN for level 5 patients.

3. The RCP will assess the patient and review the medical record to complete the Patient Assessment portion of the electronic medical record. Patient and family education also needs to be completed.

4. Requests for respiratory patient assessment may be made by the physician or the nurse, for any patient who is not receiving respiratory therapy. If this request is made, the RCP will review the medical record, assess the patient, including oxygenation status and discuss the appropriate findings with the physician or nurse. The RCP will suggest a care plan after identifying an indication for therapy. The RCP will share this information with the physician; if there is agreement, the RCP will obtain appropriate physician order to begin therapy.
5. The RCP can obtain at any time, *(without an order and subsequently, no charge)* a pulse oximetry reading to help complete their respiratory assessment. Notation in the patient chart which suggests changes require a pulse oximetry reading.