


Name of Policy: <u>Patient Assessment</u> Policy Number: 3364-136-03-04 Department: Respiratory Care Approving Officer: Associate VP Patient Care Services / CNO Responsible Agent: Director, Respiratory Care Scope: The University of Toledo Medical Center Respiratory Care Department	 Effective Date: 6/1/2020 Initial Effective Date: 9/13/1997	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy

(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.

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 Respiratory Care *Patient Assessment* portion of the electronic medical record. Patient and family education portions may also 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 requires a pulse oximetry reading.

Another option available to the physician is to have the RCP provide a full respiratory assessment and initiate appropriate respiratory therapy/therapies. This can be accomplished by the physician submitting an order for “RT Assess and Treat per Protocol” (RT Policy 3364-136-04-12). Once ordered, the RT will provide a complete respiratory assessment and initiate treatment(s) as outlined in the Assess and Treat Protocol.

<p>Approved by:</p> <p><u>/s/</u> Michael Taylor Director, Respiratory Care</p> <p><u>6/1/2020</u> Date</p> <p><u>/s/</u> Monecca Smith Associate VP Patient Care Services / CNO <i>Review/Revision Completed By: Director, Respiratory Care</i></p> <p><u>6/10/2020</u> Date</p>	<p>Review/Revision Date:</p> <p>08/13/1998 10/04/1999 03/22/2001 11/03/2004 06/15/2007 08/11/2010 08/07/2012 03/01/2016 03/01/2017 06/01/2020</p>
<p>Next Review Date: 6/1/2023</p>	
<p>Policies Superseded by This Policy:</p>	