Respiratory Assessment

Student’s Name

Institutional Affiliation

Course Number and Course Name

Professor’s Name

Date
Respiratory Assessment

Subjective:

The patient complains of stabbing chest pains that gets worse when breathing heavily or coughing.

- Reports of constant breathlessness especially when climbing stairs or talking for a long time.
- Acute cough productive of rusty sputum.
- Confusion, rapid, and shallow breathing.
- Reports experiencing fever, night sweats, and morning headache.
- No previous diagnosis of similar episodes and treatment.
- No past Hx of thoracic, nasal, pharyngeotracheal, or hospitalization for pulmonary disorders.
- No Hx of endoscopy, tracheostomy, and lobectomy.
- Denies Hx of respiratory disease, and lung surgery.
- No family Hx of respiratory diseases.

Objective:

- The patient’s temperature is above 99.6 F.
- Heartbeat is regular with a rate of 86 beats/minute.
- Breathing is uneven and labored at a rate of 18 breaths per minute at rest.
- Oxygen saturation of the blood is 90% on room air.
- Normal blood pressure 125/82.
- Adventitious lung sounds such as wheezing, stridor, and pleural rub.
- Murmur and gallop rhythm sounds are heard.
- Asymmetrical chest expansion with accessory muscle use.
- Tenderness and pain with palpation.
- Dull sounds heard in high-density regions

Assessment:

- Willingness to undertake health-promoting behaviors.
- Chest X-ray to diagnose pneumonia.
- Assessment of sounds from the lungs.

Diagnosis
• The patient was diagnosed with Bacterial lobar Pneumonia. The disease presents with an inflammatory exudate in the intra-alveolar space. The bacteria affect a huge area of the lungs, especially in the lung lobes (Ackley, 2022)

• The patient has a fever of 98.8 F, a rapid heart rate, a rusty cough, and night sweats, which are signs and symptoms of pneumonia.

Plan:

• Provide a treatment plan for the patient. The patient should take the antibiotic offered because the disease is caused by bacteria. Antibiotics are effective in fighting against bacteria.

• The patient should take aspirin to control the fever. Aspirin is effective on managing fever.

• The patient should drink warm beverages and take steamy baths and use a humidifier. These will help open up the airways and ease the patient’s breathing.

• The patient should avoid rooms with smoke or smoking. Smoke will block the airways and choke the patient to death. Preventing smoking makes the lungs heal and recover.

• The patient should get enough rest. The patient might need a comfortable bed and lie in a comfortable position to avoid pain.

• The patient should avoid extraneous activities not to strain the lungs. When doing these kinds of activities, one needs a lot of energy. As a result, they will need more oxygen to break down food to produce energy. They will damage the lungs.

• The patient experiences difficulty in breathing, he, therefore, needs supplemental oxygen using a nasal cannula at a flow rate of 2 liters per minute to maintain his oxygen level above 95% to lessen the work of breathing.

• Administer an intravenous antibacterial therapy when the patient is admitted. The therapy should be administered within 4 hours after the patient has been admitted.
Reference