El Paso Community College Syllabus Part II Official Course Description

SUBJECT AREA	Respiratory Care Technology
COURSE RUBRIC AND NUMBER	RSPT 2358
COURSE TITLE	Respiratory Care Patient Assessment
COURSE CREDIT HOURS	3 : 0
	Credits Lec Lab

I. Catalog Description

Provides integration of patient examination techniques, including patient history and physical exam, lab studies, x-ray, pulmonary function, arterial blood gases, and invasive and non-invasive hemodynamics. A grade of "C" or better is required in this course to take the next course. **Prerequisite: RSPT 2317. Corequisite: RSPT 1431 and RSPT 2460. (3:0).**

II. Course Objectives

A. Unit I. Diagnosis of Pulmonary Dysfunction

Upon satisfactory completion of this course, the student will be able to:

- 1. Discuss the etiology, pathophysiology, and respiratory care management of common respiratory diseases.
- 2. Describe the two groups of lung diseases according to physiology, obstructive and restrictive disease.
- Discuss restrictive lung disease with regard to assessment, respiratory care diagnosis, and interventions.
- 4. Define acute respiratory failure.
- 5. Explain how the complications of respiratory failure are identified.
- 6. Differentiate etiology and pathophysiology of hypoxemia and hypercapnia.
- 7. Describe assessment and treatment of both hypoxemia and hypercapnia.
- 8. Name indications for non-invasive ventilation.
- 9. Identify clinical conditions that require less frequently used modes of ventilation.
- 10. Discuss the anatomic alterations of the lungs caused by common respiratory disorders.
- 11. Discuss the major pathophysiologic mechanisms activated throughout the respiratory system as a result of the anatomic alterations.

B. UNIT II. Laying the Foundation

- 1. Identify the purpose of the pre-interaction, introductory, initial assessment, treatment, and follow-up stages of patient-clinician interaction. Consider language, disabilities, and age.
- 2. Explain the relevance of cultural diversity customs and rituals in the history-taking process.
- 3. Describe the following techniques that may be used to convey genuine concern during patient-clinician interaction.
 - a. Face the patient squarely
 - b. Use eye contact appropriately
 - c. Maintain an open posture
 - d. Consider appropriate use of touch
 - e. Be an active listener

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- 4. Describe the skills necessary to gather information and record patient assessment using the SOAP format.
- 5. Recognize the approximate distances and appropriate activities for proper assessment.
- 6. Recognize the value of the patient's territoriality, which include all items within a certain boundary around his/her bed.
- 7. Explain the importance of properly obtaining and recording a patient history.
- 8. Describe techniques for structuring the interview.
- 9. Describe the components of a complete health history and physical assessment.
- 10. Describe the general premise of universal precautions and methods by which they are practiced.
- 11. Recognize the four classic vital signs and the value of monitoring their trends.
- 12. Describe the method for implementing and evaluating the documentation of the pulmonary assessment data.
- 13. Describe how to perform the following components on a pulmonary physical examination.
 - a. Inspection
 - b. Palpation
 - c. Percussion
 - d. Auscultation
- 14. Recognize the importance of reviewing the history of present illness before performing a physical examination.
- 15. Explain the significance of jugular venous distention.
- 16. List the signs associated with respiratory distress.
- 17. Discuss the physiology of normal fluid and electrolyte balance.
- 18. Discuss abnormalities of hemoglobin, platelets, and leukocytes.
- 19. Describe the pathophysiology of cardiac dysfunction in an anatomic format.
- 20. Discuss the clinical value of the electrocardiogram.
- 21. Describe the changes in right heart function caused by respiratory disease and methods of assessment.
- 22. Define anemia and identify the most common causes of anemia.
- 23. Describe lab tests for cardiac function, their use in clinical practice.
- C. Unit III. Advanced Assessment Techniques
 - 1. Recognize the general purpose of performing pulmonary function tests.
 - 2. Recognize the situations in which PFTs are indicated.
 - 3. Identify how the following factors affect PFT measurements:
 - a. Height and weight
 - b. Gender
 - c. Age
 - d. Patient effort
 - 4. Identify the correct position for endotracheal tube placement on a chest radiograph.
 - 5. Differentiate between an abnormal and normal chest radiograph as related to pulmonary disease.
- D. Unit IV. Special Populations
 - 1. Identify the anatomic landmarks of the thorax.
 - 2. Describe the characteristics of the most common respiratory chief complaints.
 - 3. Describe the pathological changes that occur in the lungs with the aging process.
 - 4. Identity several techniques for reducing communication barriers with older adult patients.
 - 5. Describe techniques health care providers can use to compensate for hearing and vision loss in patients.
 - 6. Identify specific diagnostic tests that have altered age-related normal values.
 - 7. Identity the importance of the physical assessment in the critically ill patient.
- E. Unit V. Special Procedures
 - 1. Define cardiac output and venous return

- 2. Recognize the noninvasive methods for evaluating cardiac performance.
- 3. Recognize the factors that cause erroneously elevated blood pressure measurements.
- 4. Recognize the following regarding arterial cannulation:
 - a. Indications
 - b. Cannulation sites
 - c. Possible complications
 - d. Normal pressures and their significance
- 5. Recognize the following regarding Swan-Ganz catheterization
- 6. a. Identify your catheter placement using waveforms
 - b. Integrate hemodynamic readings in patient assessment
- 7. List the five most common indications for bronchoscopy
- 8. Identify the factors believed to be responsible for the pathophysiology of obstructive sleep apnea
- 9. Recognize the key elements involved in home respiratory care assessment of sleep apnea.
- 10. Describe the physiologic effect of the different types and stages of sleep on the cardiovascular and respiratory system in the healthy adult.
- 11. Identify the sleep characteristics that may be useful in screening the patient for obstructive sleep apnea.
- 12. Identify the methods used to drain the pleural space and complications associated with those methods.
- 13. Identify the purpose and correct function of one-, two-, or three-bottle closed chest drainage systems.

III. THECB Learning Outcomes (WECM)

- 1. Interpret patient history and physical exam.
- 2. Evaluate lab studies, x-ray, pulmonary function, arterial blood gases, and invasive and noninvasive hemodynamics.

IV. Evaluation

Grading Scale

90 to 100 A 80 to 89 B 75 to 79 C 74 or below I or F I= Incomplete

W= Withdrew or Withdrawn

V. Disability Statement (American with/Disabilities Act [ADA])

EPCC offers a variety of services to persons with documented sensory, mental, physical, or temporary disabling conditions to promote success in classes. If you have a disability and believe you may need services, you are encouraged to contact the Center for Students with Disabilities to discuss your needs with a counselor. All discussions and documentation are kept confidential. Offices located: VV Rm C-112 (831-2426); TM Rm 1400 (831-5808); RG Rm B-201 (831-4198); NWC Rm M-54 (831-8815); and MDP Rm A-125 (831-7024).

VI. 6 Drop Rule

Students who began attending Texas public institutions of higher education for the first time during the Fall 2007 semester or later are subject to a 6-Drop limit for all undergraduate classes. Developmental, ESL, Dual Credit and Early College High School classes are exempt from this rule. All students should consult with their instructor before dropping a class. Academic assistance is available. Students are encouraged to see Counseling Services if dropping because exemptions may apply. Refer to the EPCC catalog and website for additional information.

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^{*}Grades resulting in a decimal fraction of 0.5 or greater will be rounded off to the next whole number.