STUDENT'S NAME _____

DATE _____

FOR FACULTY USE ONLY	DATE _____
EDUCATOR'S NAME _____	
	PASS / FAIL

ati NURSING EDUCATION

Checklist
Vital Signs: Assessing Respirations

Step by Step	SATISFACTORY	UNSATISFACTORY	EVALUATOR'S COMMENTS
Assessing Respirations			
*Provide privacy as needed.			
*Introduce yourself to the client.			
*Perform hand hygiene and put on appropriate PPE if indicated.			
*Verify client identification.			
*Determine whether the client has allergies.			
*Provide client education.			
Position client sitting or lying, with head of the bed elevated to 45 to 60 degrees.			
Verify the client's chest is visible, removing any bed linen or gown as needed.			
Place client's arm across abdomen or lower chest.			
With your fingers in place to measure the pulse, observe for rise and fall of the client's chest for a full respiratory cycle.			
Using a watch with a second hand, begin counting the number of respirations for 30 seconds and multiply the number by 2.			
Count respirations for 1 full minute if the rhythm is irregular or abnormal rate.			
Note the depth and rhythm of the respirations.			
When the measurement is completed, replace the client's gown or bed linens.			
*Ensure that the client is in a safe position prior to leaving the room and has the call light within reach.			
Compare findings with the client's baseline.			

**Document the relevant information (rate, depth, and rhythm) in the client's medical record.*

References

Potter, P. A., Perry, A. G., Stockert, P., & Hall, A. (2017). Fundamentals of nursing (9th ed.). St. Louis, MO: Elsevier, pp. 521-522

Taylor, C., Lynn, P. and Bartlett, J. (2019). Fundamentals of Nursing (9th ed.). Philadelphia: Wolters Kluwer, pp. 680-681

©2020 Assessment Technologies Institute®, Inc.