

The videos were very helpful in explaining the differences between pneumonia, COPD, TB. Also, explaining the chest tube and how the wet and dry water seal chambers work and what sleep apnea was like. I was never aware that there were three different types of pneumonia; community acquired, hospital acquired, and aspiration. Also I did not know that there was no wheezing in pneumonia. Streptococcus pneumoniae can be spread through equipment not being cleaned properly, absence of hand hygiene, etc. In the TB video, a lot was mentioned about how it can occur. Immunosuppressed are at a great risk to get TB. If you think about it, it all makes sense. Homeless people huddle to stay warm, so they are all up close and personal and are susceptible. Same with people that live closer together. TBs diagnosing shocked me. I always just thought it was the PPD but no, it is diagnosed through a sputum culture and it takes up to 8 weeks to get the results back. If you get diagnosed with TB and you have a liver disease or any liver problems, that person may not be able to be treated correctly because TB medications are very hard on the liver. There are a ton of medications for TB. It is hard for people because normal people that have to take antibiotics usually last 10 days and people with TB have to take it for 6-9 months. After a person gets diagnosed via PPD, they start on antibiotics. The sputum culture helps detect if the antibiotics will work or are working. If a person's PPD comes back they isolate so they do not spread it. After 2-3 weeks of being on antibiotics, the person is no longer contagious if the antibiotics are effective. Chronic obstructive pulmonary disease (COPD) also known as emphysema or chronic bronchitis occurs mostly in people who have or do smoke. People with COPD think they can get addicted to oxygen but our bodies are already addicted to oxygen. COPD can be very hard on people. Severe emphysema can cause a person to be thin due to not wanting to eat so they can breathe. Emphysema is diagnosed via chest x-ray whereas chronic bronchitis is diagnosed by having a productive cough for 2 years. COPD patients do tripod sitting where they are trying their best to breathe or sit with the head of bed up in semi-fowlers to sleep. Sleep apnea is when your airway gets blocked off when you go to sleep. It is diagnosed through a sleep study called polysomnography. A person can have up to 200 episodes in just one night. People with sleep apnea can get very irritable due to not sleeping well at night and constantly waking up. A person with sleep apnea and has begun treatment with a bi-pap or c-pap has to take that everywhere with them. Chest tubes were very interesting to me. I honestly don't know what it was for. I just knew that people got chest tubes when a person's lung(s) collapsed. I learned the difference between a hemothorax and pneumothorax. Pneumothorax is air in the pleural space whereas hemothorax is blood in the pleural space. I also didn't know that chest tubes had a wet and dry system. How they work is incredible and the fact that you can tell if the air leak is coming from the machine or the patient is good to be able to know. Chest tubes can be very painful for a patient. They are hard, are not flexible and just are not comfortable for a patient. Also, if the pt moves and rusty colored comes out, it is more than likely old blood. If the chamber ever has more than 100cc/hr you have to report it to the health care provider.