Firelands Regional Medical Center School of Nursing
Nursing Access
Online Discussion
Respiratory Case Study

Original Post Due by 2200 on Thursday 10/07/2021
Response Due by 2200 on Friday 10/08/2021

All online discussion groups will be found under the "Discussions" tab of the course in Edvance360. Your original post for each discussion group is to be completed by Thursday at 2200 and must consist of at least 250 words. All students are expected to respond substantively to at least one other student posting by Friday at 2200. A substantive response consists of at least a 100-200-word response and includes more than simply agreeing with or restating another peers' comments. Please refer to the online discussion Grading Rubric for details on requirements for online discussions.

Instructions: Read the patient profile and case study below. After reading the information, answer the accompanying questions by 2200 on Thursday 10/07/2021. Respond to one of your peers in a substantive manner by 2200 on Friday 10/08/2021. You are allotted 1-hour **total** of theory (online) time for your original post and your substantive response.

Patient Profile

Mr. Black is a 75-year-old male admitted with an exacerbation of chronic obstructive pulmonary disease. He has been keeping the head of the bed up for most of the day and night to facilitate his breathing which has resulted in lower back pain. Acetaminophen (Tylenol) was not effective in reducing his pain, so the health care provider has prescribed oxycodone/acetaminophen (Percocet) two tablets by mouth every six hours as needed for pain. Mr. Black is on 2 liters of oxygen by nasal cannula. He has albuterol respiratory treatments ordered every six hours as needed. Mr. Black needs someone to walk beside him when he ambulates because he has an unsteady gait and often needs to stop to catch his breath.

Case Study

The nurse enters the room and finds Mr. Black hunched over his bedside table watching television. He says this position helps his breathing. His lung sounds are clear but diminished bilaterally. Capillary refill is four seconds and slight clubbing of his fingers is noted. His oxygen saturation is being assessed every two hours to monitor for hypoxia. Each assessment reveals oxygen saturation at rest of 90% to 94% on 2 liters of oxygen by nasal cannula. After breakfast, Mr. Black reports lower back pain that caused him increased discomfort while ambulating to the bathroom. He describes the pain as a dull ache and rates the pain a "6" on a 0–10 pain scale. He requests two oxycodone/acetaminophen (Percocet) tablets. The nurse assesses Mr. Black's vital signs (blood pressure 150/78, pulse 90, respiratory rate 26) and gives the Percocet as prescribed. Forty-five minutes later, Mr. Black states the Percocet has helped relieve his back pain to a "2" on a 0–10 pain scale and he would like to take a walk in the hall. The nurse checks his oxygen saturation before they leave his room, and it is 92%. Using a portable oxygen tank, the nurse

walks with Mr. Black from his room to the nurse's station (approximately 60 feet). Mr. Black stops to rest at the nurse's station because he is short of breath. His oxygen saturation at the nurse's station is 86%. After a few deep breaths and rest, his oxygen saturation rises to 91%. Mr. Black walks back to his room where he sits in his recliner to wait for lunch. His oxygen saturation is initially 87% when he returns and then 91% after a few minutes of rest. Expiratory wheezes are heard bilaterally when the nurse assesses his lung sounds. While Mr. Black waits for lunch to arrive, the nurse calls respiratory therapy to give Mr. Black his albuterol treatment. The respiratory treatment and rest relieves his acute shortness of breath. His oxygen saturation is now 93%, and his lung sounds are clear but diminished bilaterally.

Case Study Questions

1. Briefly define chronic obstructive pulmonary disease (COPD).
2. List at least five signs and symptoms of respiratory distress the nurse may observe in a patient with COPD.
3. Describe the physical appearance/characteristics of a patient with COPD.
4. Explain why the nurse did not increase Mr. Black's oxygen to help ease his shortness of breath.
5. List at least three non-pharmacological interventions the nurse could implement to help decrease Mr. Black's difficulty breathing. Provide a rationale for each intervention listed.
6. List at least three safety considerations the nurse should include in discharge teaching regarding the use of oxygen in the home.
7. List one appropriate nursing diagnosis for Mr. Black.