Chapter 10

Recording Skills: The Basis for Data Collection, Organization, Assessment Skills, and Treatment Plans
Types of Patient Records

- Traditional chart
- Problem-oriented medical record (POMR)
- Computer documentation
Traditional Chart

- Also called block chart or source-oriented record
- Divided into distinct areas or blocks
- Emphasis placed on specific information
Traditional Chart (Cont’d)

- Typical blocks include:
  - Admission sheet
  - Physician's order sheet
  - Progress notes
  - History and physical examination data
  - Medication sheet
  - Respiratory care sheet
  - Nurses’ admission information
  - Nursing care plans
Problem-Oriented Medical Record (POMR)

1. Systematically gather clinical data
2. Formulate an assessment
3. Develop an appropriate treatment plan
SOAP—
Most Common POMR

S: Subjective information
O: Objective information
A: Assessment (cause of subjective and objective data)
P: Plan (treatment selection)
SOAP

S: Subjective information presented by the patient. For example:

- “I coughed hard all night long.”
- “My chest feels very tight.”
- “I feel very short of breath.”
SOAP (Cont’d)

O: Objective information that can be measured, factually described, or obtained from other professional reports or test results. Includes the following:

- Heart rate
- Respiratory rate
- Blood pressure
- Temperature
- Breath sounds
- Cough effort
A: Professional conclusion about the cause of the subjective and objective data. For example:

- The assessment of bronchospasm can be concluded from wheezes.
- Or, acute ventilatory failure with moderate hypoxemia can be inferred from the following ABGs:
  - pH: 7.18
  - \( \text{PaCO}_2 \): 80 mm Hg
  - \( \text{HCO}_3^- \): 29 mEq/L
  - \( \text{PaO}_2 \): 54 mm Hg
SOAP (Cont’d)

**P:** Plan is the therapeutic procedure(s) selected to remedy the cause identified in the assessment. For example:

- An assessment of bronchial smooth muscle constriction justifies the administration of a bronchodilator
- The assessment of acute ventilatory failure justifies mechanical ventilation
SOAPIER
Extended SOAP model with the added “IER”

- **I:** Implementation—the actual administration of the specific therapy plan
- **E:** Evaluation—collection of measurable data regarding the effectiveness of the plan
- **R:** Revision—refers to any changes that may be made to the original plan in response to the evaluation
SOAP Case Example

- A 26-year-old man arrived in the emergency room with a severe asthmatic episode. On observation, his arms were fixed to the bed rails, he was using his accessory muscles of inspiration, and he was using pursed-lip breathing. The patient stated that “it feels like someone is standing on my chest. I just can’t seem to take a deep breath.”
SOAP Case Example (Cont’d)

- His heart rate was 111 beats per minute and his blood pressure was 170/110. His respiratory rate was 28 and shallow. Hyperresonant notes were produced on percussion. Auscultation revealed expiratory wheezing and rhonchi bilaterally. His chest x-ray revealed a severely depressed diaphragm and alveolar hyperinflation.
SOAP Case Example (Cont’d)

- His peak expiratory flow was 165 L/min. Even though his cough effort was weak, he produced a large amount of thick white secretions. His arterial blood gases showed a pH of 7.27, a PaCO₂ of 62, and an HCO₃⁻ of 25, and a PaO₂ of 49 (on room air) (see Figure 10-1).
SOAP Case Example
General Information

- Age: 26
- Sex: male
- Admitting diagnosis: asthma
Admitting Diagnosis: Asthma.
SUBJECTIVE

“It feels like someone is standing on my chest.”

“I just can’t seem to take a deep breath.”
OBJECTIVE

- RR 28
- HR 111
- BP 170/110
OBJECTIVE

- Use of accessory muscles
- Pursed-lip breathing
- Hyperresonant
- Expiratory wheezing and rhonchi (bilateral)
- X-ray exam: Severely depressed diaphragm
- PEFR: 165
- Weak cough
- Large amount of thick white secretions
- pH 7.27, PaCO$_2$ 62, HCO$_3^-$ 25, PaO$_2$ 49
Use of accessory muscles
Pursed-lip breathing
Hyperresonant
Exp. wheezing
Rhonchi
X-ray film: Severely depressed diaphragm
PEFR: 165
Weak cough
Lg. amt thick and white sec.
pH 7.27, PaCO$_2$ 62, HCO$_3^-$ 25, PaO$_2$ 49

Respiratory distress
Bronchospasm
Lg. airway sec.
Poor ability to mobilize thick secretions
Acute ventilatory failure and severe hypoxemia
ASSESSMENT

Respiratory distress

Bronchospasm → Bronchodilator Tx

Lg airway secretions

Poor ability to mobilize thick secretions → Bronchial hygiene Tx

Acute ventilatory failure and severe hypoxemia

Mechanical vent. Tx → Oxygen Tx
Figure 10-1. Completed predesigned SOAP form.
Figure 10-1: Abbreviated Form

**S:** “It feels like someone is standing on my chest. I can’t take a deep breath.”

**O:** Use of acc. mus. of insp.; HR 111, BP 170/110, RR 28 and shallow, pursed-lip; hyperresonance; exp. whz; diaph. and hyperinfl.; PEFR 165; wk. cough; lg. amt. thick/white sec.; pH 7.27, PaCO$_2$ 62, HCO$_3^-$ 25, PaO$_2$ 49

**A:** Bronchospasm; hyperinflation; poor ability to mob. tk. sec.; acute vent. fail. with severe hypox.

**P:** Bronchodilator Tx/pro.; CPT and PD/pro., mucolytic/pro., mech. vent/pro.; ABG 30 min
Figure 10-2 A, Respiratory care protocol guide.
**Figure 10-2 B, Respiratory care protocol guide.**

Computer Documentation

- **So-called:**
  - Electronic medical records
  - Electronic health records
  - Computer-based personal records
  - Electronic patient medical charts
Health Insurance Portability and Accountability Act (HIPAA)

- Both the health-care provider and a representative of the insurance company must explain to the patient how they plan to disclose any medical records.
- Patients may request copies of all their medical information and make appropriate changes to it. Patients may also ask for a history of any unusual disclosures.
Health Insurance Portability and Accountability Act (HIPAA) (Cont’d)

- The patient must give formal consent should anyone want to share any health information.
- The patient’s health information is to be used only for health purposes. Without the patient’s consent, medical records cannot be used by:
  1. A bank to determine whether to give the patient a loan
  2. A potential employer to determine whether to hire the patient
Health Insurance Portability and Accountability Act (HIPAA) (Cont’d)

- When the patient’s health information is disclosed, only the minimum necessary amount of information should be released.
- A patient’s psychotherapy records get an extra level of protection.
- The patient has the right to complain to HHS about violations of HIPAA rules.