Chapter 15 - Reassessment

OBJECTIVES

15.1 Define key terms introduced in this chapter. Slides 9, 20
15.2 Explain the importance of reassessment. Slides 9–10
15.3 Identify the proper points in the patient care process at which reassessment should be performed. Slides 21–22

continued

15.4 Discuss the purpose of each of the components of reassessment. Slides 12–13, 15, 17, 19
15.5 Adapt the reassessment process and frequency of reassessment based on patients' conditions. Slides 19–22

continued
**OBJECTIVES**

15.6 Recognize both obvious and subtle changes in patient condition. Slides 19–22
15.7 Assign meaning to trends in patient condition over time. Slides 19–20

**MULTIMEDIA**

- Slide 23 Ongoing Assessment Video
- Slide 27 Detailed Assessment Video

**CORE CONCEPTS**

- How to perform reassessment
- The significance of changes in vital signs over time
- The difference in reassessments for stable versus unstable patients
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Topics

- Reassessment
- Comparing Assessments

Reassessment

- Continues on initial steps of assessment
- Identifies changes and trends
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What Reassessment Identifies
- Changes (subtle and profound)
- Trends
- Deterioration
- Improvement

Communicate with Patient
- Explain process
- Consider patient's feelings, such as anxiety or embarrassment

Repeat Primary Assessment
- Recheck for life-threatening problems
- Reassess mental status
- Maintain open airway
- Monitor breathing (rate and quality)
- Reassess pulse (rate and quality)
- Monitor skin color and temperature
- Re-establish patient priorities
Reassess Vital Signs

- Compare results with baseline measurements
- Re-evaluate oxygen
- Document findings to record and identify trends

Think About It

- Think of an example of a problem that might develop into a life threat to the patient on the way to the hospital.

Repeat Focused Assessment

- Chief complaint may change, especially with regard to severity
- Ask about changes in symptoms, especially ones anticipated because of treatments administered
- Repeat physical exam to identify changes from baseline
- Check any interventions
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Repeat Focused Assessment  Repeat Physical Exam

Check Interventions
- Ensure adequacy of oxygen delivery and artificial ventilation
- Ensure management of bleeding
- Ensure adequacy of other interventions

Think About It
- Describe an example of an intervention that might need to be reevaluated and discuss your process for examining it.
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Observing Trends

- Repeat reassessment steps frequently
- Establish and document trends

Trending: observing patterns that have emerged among vital signs. Trends may indicate new treatments or adjustments to ongoing treatments.

Reassessment for Stable and Unstable Patients

- Patient condition, as well as length of time with patient, will determine how often you reassess
- The more serious patient’s condition, the more often you reassess
When to Reassess

- Every 15 minutes for stable patient
- Every 5 minutes for unstable or potentially unstable patient
- If you believe there may have been a change in patient’s condition, repeat at least primary assessment

Ongoing Assessment Video

Comparing Assessments
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Reassessment: Stable Medical Patient

- Repeat primary assessment
- Repeat and record vital signs
- Repeat pertinent parts of history and physical exam
- Check interventions you performed
- Repeat all steps every 15 minutes

Reassessment: Unstable Trauma Patient

- Repeat primary assessment to check for life-threatening problems
- Repeat and record vital signs
- Repeat trauma assessment
- Check interventions you performed
- Repeat all steps every 5 minutes

Detailed Assessment Video

Click here to view a video on the subject of a detailed exam of a patient.
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Chapter Review

- Reassessment is the last step in your assessment of a patient.
- You should reassess a stable patient at least every 15 minutes and an unstable patient at least every 5 minutes.

continued

Chapter Review

- Elements of reassessment include the primary assessment, vital signs, pertinent parts of the history and physical exam, and checking the interventions you performed for the patient.
- Interventions you need to check include oxygen, bleeding, spine immobilization, and splints.
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Remember

• Assess if the patient’s condition changed in any way, indicating the need for new interventions. Is the airway clear? Is breathing adequate? Is circulation intact?
• Check the interventions you performed. Are they functioning as they should?
• Adjust interventions if necessary.

Questions to Consider

• Name the four steps of reassessment and list what assessments you will make during each step.
• Explain the value of recording, or documenting, your assessment findings, and explain the meaning of the term trending.

Critical Thinking

• What must you do if your reassessment turns up one of these findings?
  – Gurgling respirations
  – Bag on nonrebreather mask collapses completely when patient inhales
  – Snoring respirations
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