HACKETTSTOWN REGIONAL MEDICAL CENTER CARDIO PULMONARY POLICY MANUAL PULMONARY REHABILITATION VISIT PROCEDURES

Effective Date: March 2010	Policy No: 9.002
Cross Referenced:	Origin: Cardio Pulmonary
Reviewed Date: 02/16	Authority: Cardio/Pulmonary Manager
Revised Date: 02/16	Page: 1 of 3

Purpose: To outline the day to day procedures and documentation of pulmonary rehabilitation.

Initial Contact (By Phone or in person)

- Provide short explanation about program.
- Tour center (if done in person).
- Ask about diagnosis, insurance, prescription, PFT and eligibility.
- Inform them they will need to register prior to first visit.
- Schedule first and second visit.
- Remind patient to wear comfortable clothes and safe shoes.

Initial Visit

- Complete Intake Summary Form.
- Have patient sign medical records release and commitment.
- If patient has signed release, request last PFT.
- Determine patient goals.
- Have patient complete surveys.
- Explain Borg scale.
- Obtain baseline vital signs (B/P, O2sat, HR, resp. rate) and breathe sounds.
- Determine need for pre-medication and administer bronchodilator (if needed).
- Perform pulmonary stress test. (PST)
 - Perform pre-exercise spirometry.
 - ▶ Have patient walk around hallway (track) for 6 minutes.
 - Monitor O2sats, HR, resp. rate and Borg throughout activity. (End procedure if patient becomes distressed or has chest pain)
 - > After 6 minutes, have patient stop walking and sit down.
 - > Perform B/P, HR, resp. rate, breathe sounds, Borg and O2sat.
 - > Perform post exercise spirometry.
- Complete the Daily Summary, Assessment and Care plan and Progress Evaluation forms.
- Have Medical Director review and sign Progress Evaluation and Assessment and Care plan forms.
- Enter charges into EMR for session at the end of each session.
- a. Access patient chart.
- b. Access orders.
- c. Place a RTC order.
 - 1. Enter the number of modifiers
 - 2. Correct date of service and start time.

Visit 2 and Subsequent Visits

- Assess patient's subjective status.
- Ask patient for any questions or changes since last visit.
- Obtain baseline vital signs and breathe sounds.
- Administer bronchodilator, if indicated.
- Educate and demonstrate pursed lip breathing and diaphragmatic breathing.
- Introduce and perform warm up and stretching exercises.
- Perform weight training. (Thera-Bar or weights)
- Review diagnosis and provide a brief education on lung function.

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- Instruct/demonstrate the patient on IS (pipes) and IMT and continue to practice/perform IMT and IS (pipes) at every visit. (following each aerobic exercise, as tolerated)
- Determine most beneficial order for aerobic exercises. (may need multiple sessions)
- Begin with treadmill (or track) as tolerated.
- Incorporate Nustep recumbent bike, as tolerated.
- Monitor vital signs including Borg during all aerobic exercises.
- Provide encouragement and utilize breathing techniques.
- Allow for recovery time after each aerobic exercise.
- Total aerobic time should be increased as tolerated to 1/2 -3/4 of session time.
- Perform chest physiotherapy for bronchial hygiene, if indicated.
- Review educational topics.
- Record educational subject covered on Educational Checklist.
- Provide educational handouts as needed.
- Complete Daily Summary Sheet
- Enter charges into EMR for session at the end of each session.
- a. Access patient chart.
- b. Access orders.
- c. Place a RTC order.
 - a. Enter the number of modifiers
 - b. Correct date of service and start time.

All subsequent visits will be conducted in similar manner to Visit 2 except when a 30 day reassessment must be done.

Reassessment will be conducted as follows:

30 Day Reassessment Visit

- Assess patient's subjective status.
- Ask patient for any questions or changes since last visit.
- Obtain baseline vital signs and breathe sounds.
- Perform pulmonary stress test. (PST)
 - Perform pre-exercise spirometry.
 - Have patient walk around hallway (track) for 6 minutes. The equipment used in Visit 1 must be used (track), or a detailed note as to why not must be written on the Daily Summary and Progress Evaluation Form.
 - Monitor O2sats, HR, resp. rate and Borg throughout activity. (End procedure if patient becomes distressed or has chest pain)
 - > After 6 minutes, have patient stop walking and sit down.
 - > Perform B/P, HR, resp. rate, breathe sounds, Borg and O2sat.
 - Perform post exercise spirometry.
- Complete Progress Evaluation Form.
- Complete Assessment and Care Plan Form (modify as needed).
- Have Medical Director review and sign Progress Evaluation and Assessment and Care Plan Forms.
- Complete Daily Summary Sheet
- Enter charges into EMR for session at the end of each session.

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- a. Access patient chart.
- b. Access orders.
- c. Place a RTC order.
 - a. Enter the number of modifiers
 - b. Correct date of service and start time.

Final Visit

- Assess patient's subjective status.
- Ask patient for any questions or changes since last visit.
- Obtain baseline vital signs and breathe sounds.
- Perform pulmonary stress test. (PST)
 - Perform pre-exercise spirometry.
 - Have patient walk around hallway (track) for 6 minutes. The equipment used in Visit 1 must be used (track), or a detailed note as to why not must be written on the Daily Summary and Progress Evaluation Form.
 - Monitor O2sats, HR, resp. rate and Borg throughout activity. (End procedure if patient becomes distressed or has chest pain)
 - > After 6 minutes, have patient stop walking and sit down.
 - > Perform B/P, HR, resp rate, breath sounds, Borg and O2sat.
 - Perform post exercise spirometry.

• Complete Progress Evaluation Form.

- Complete Assessment and Care Plan Form (modify as needed).
- Have Medical Director review and sign Progress Evaluation and Assessment and Care Plan Forms.
- Complete surveys.
- Give patient Patient Exit Survey to complete and return.
- Complete Daily Summary Sheet.
- Give patient Graduation Certificate.
- Enter charges into EMR for session at the end of each session.
- a. Access patient chart.
- b. Access orders.
- c. Place a RTC order.
 - a. Enter the number of modifiers
 - b. Correct date of service and start time.

Additional Visit Procedures as Needed

- Spirometry, as indicated.
- Chest physiotherapy, as indicated.
- Bronchodilator administration, as indicated.

The Medical Director and/ or patient designated physician may be contacted as needed for further instructions.