

Pediatric Respiratory Disorders

Respiratory Assessment

- LOC
- Vital Signs (RR, HR, temp)
- Color...can get dusky pretty quick.
- Inspection (chest expansion, WOB). The chest wall is very soft and can see WOB very easily.
- Auscultation
- Pulse oximeter
- Transcutaneous CO₂ monitoring...can use on kids < 2 to check CO₂ levels through the skin.

Chest Retracts	Xiphoid Retracts	Nasal flaring	Grunting
None	None	None	None
Just visible	Just visible	Minimal	Steth only
Marked	Marked	Marked	Naked ear

Video

- RF = Inadequate elimination of CO₂ and or inadequate oxygenation of blood. Can result from lung or airway disease or inadequate effort (head injury)
- RD = compensated clinical state of respiratory dysfunction where pt has a increased rate and effort in breathing.
- Increased AP diameter seen in chronic lung disease
- Listen to lung sounds along midaxillary line and move gradually toward back...should hear soft tubular sound as air enters and minimal to no sound as air leaves.
- Stridor = inspiratory high-pitched sound heard with airway obstruction (of upper airway)
- Prolonged expiration usually with wheezing signifies obstruction of mid airway?
- Grunting is produced by premature closure of glottis during active expiration...usually a sign of a pt attempting to maintain volume of gas in lungs by increasing end expiratory pressure. Pulmonary edema, PNA, atelectasis, ARDS
- Inspiratory retractions indicate upper airway obstruction or any disease that affects compliance.
- Children are diaphragmatic breathers until about 7 years
- Infant has 20 million alveoli at age...at 8 years, will have 300 million (adult level).
- Infants have increased metabolic demand...and oxygen consumption (6-8 ml/kg/min vs adults at 3-4 ml/kg/min)
- Factors making infants more susceptible to respiratory distress
 - size of airway
 - pliability of ribs & sternum
 - position of ribs r/t sternum
 - fewer alveoli
 - high rate of oxygen consumption

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G Thomas



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Table of Contents Respiratory Assessment Documentation Example

1. Understanding the eBook Respiratory Assessment Documentation Example
 - The Rise of Digital Reading Respiratory Assessment Documentation Example
 - Advantages of eBooks Over Traditional Books
2. Identifying Respiratory Assessment Documentation Example
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Respiratory Assessment Documentation Example
 - User-Friendly Interface
4. Exploring eBook Recommendations from Respiratory Assessment Documentation Example
 - Personalized Recommendations
 - Respiratory Assessment Documentation Example User Reviews and Ratings
 - Respiratory Assessment Documentation Example and Bestseller Lists
5. Accessing Respiratory Assessment Documentation Example Free and Paid eBooks
 - Respiratory Assessment Documentation Example Public Domain eBooks
 - Respiratory Assessment Documentation Example eBook Subscription Services
 - Respiratory Assessment Documentation Example Budget-Friendly Options
6. Navigating Respiratory Assessment Documentation Example eBook Formats
 - ePub, PDF, MOBI, and More
 - Respiratory Assessment Documentation Example Compatibility with Devices
 - Respiratory Assessment Documentation Example Enhanced eBook Features
7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Respiratory Assessment Documentation Example
 - Highlighting and Note-Taking Respiratory Assessment Documentation Example
 - Interactive Elements Respiratory Assessment Documentation Example
8. Staying Engaged with Respiratory Assessment Documentation Example

- Joining Online Reading Communities
- Participating in Virtual Book Clubs
- Following Authors and Publishers Respiratory Assessment Documentation Example
- 9. Balancing eBooks and Physical Books Respiratory Assessment Documentation Example
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Respiratory Assessment Documentation Example
- 10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
- 11. Cultivating a Reading Routine Respiratory Assessment Documentation Example
 - Setting Reading Goals Respiratory Assessment Documentation Example
 - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of Respiratory Assessment Documentation Example
 - Fact-Checking eBook Content of Respiratory Assessment Documentation Example
 - Distinguishing Credible Sources
- 13. Promoting Lifelong Learning
 - Utilizing eBooks for Skill Development
 - Exploring Educational eBooks
- 14. Embracing eBook Trends
 - Integration of Multimedia Elements
 - Interactive and Gamified eBooks

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