



"बेटी बचाओ, बेटी पढ़ाओ"

JAYOTI VIDYAPEETH WOMEN'S UNIVERSITY, JAIPUR

Faculty of Physiotherapy & Diagnostic

Faculty Name- JV'n SHIFALI BAGRIYA (Lecturer)

Program- 5th Semester

Course Name – Patient care and hospital practice

Digital Session name- Care of the patient

Program outcome –

B SC RT Student in this professional degree program learn to demonstrate the appropriate knowledge of radiation therapy procedure, apply principles of radiation protection for patient ,self and others: perform radiation therapy simulation procedure, perform basic radiation therapy dose calculation and access treatment plans and delivers radiation therapy treatment as prescribed by a radiation oncologist.

Course outcome-

Students can learn about hospital management system helps register complete patient information. It captures and stores the medical history, treatment required, details of their previous visits, upcoming appointments if any, reports, insurance details and more. It helps eliminate the need to get these details on every visit. Student can also learn about Evidence-based Leadership, Management, Communication and Collaboration, Strategic and Business Planning, Ethics and Responsibility.

Academic Day starts with –

- Greeting with saying ‘**Namaste**’ by joining Hands together following by 2-3 Minutes Happy session, Celebrating birthday of any student of respective class and **National Anthem**.

TOPIC- Care of the patient

The first contact with patients in a hospital department Registration:

When a patient arrives at the hospital, they are usually required to go through a registration process. This involves providing personal information, insurance details, and the reason for their visit. Registration can occur at a front desk or may be done electronically.

Triage: In an emergency department, a nurse or healthcare provider may perform triage to assess the urgency of the patient's condition. Triage helps prioritize care based on the severity of the patient's illness or injury.

Vital Signs: After registration and triage, a nurse or medical assistant will often take the patient's vital signs, including temperature, blood pressure, heart rate, and respiratory rate. This provides initial information about the patient's overall health.

Medical History: The patient may be asked to provide a medical history, including any pre-existing conditions, allergies, medications, and a description of their current symptoms or complaints.

Physical Examination: A healthcare provider, such as a doctor or nurse practitioner, will conduct a physical examination to further assess the patient's condition. They will listen to the patient's heart and lungs, check for specific symptoms, and perform other relevant examinations.

Diagnostic Tests: Depending on the patient's symptoms, the healthcare provider may order diagnostic tests such as blood tests, X-rays, or imaging scans to aid in diagnosis and treatment planning.

Treatment Plan: After the initial assessment and any necessary tests, the healthcare provider will develop a treatment plan. This may include medications, procedures, or further consultations with specialists.

Informed Consent: Before any procedures or treatments, the patient will be informed about the recommended course of action and asked for their consent to proceed.

Communication: Effective communication with the patient is crucial. The healthcare team should provide clear explanations, answer questions, and ensure the patient understands their condition and the proposed treatment.

Discharge or Admission: Depending on the severity of the patient's condition, they may be discharged with instructions for at-home care or admitted to the hospital for further treatment and observation.

It's important to note that the specific steps and procedures may vary depending on the hospital's protocols and the nature of the patient's condition. Providing compassionate and patient-centered care is a fundamental aspect of the first contact with patients in a hospital department

Managing patients on chairs and stretchers

Managing patients on chairs and stretchers in a healthcare setting is crucial for their comfort and safety. Additionally, the use of aids and equipment can facilitate these processes. Here's an overview:

Management of Chair Patients:

Assessment: Assess the patient's mobility, stability, and overall health to determine if they are suitable for sitting in a chair. Ensure the patient can safely maintain a seated position.

Chair Selection: Choose an appropriate chair for the patient. Wheelchairs or standard chairs with armrests are common options. Ensure that the chair is clean and in good condition.

Positioning: Help the patient into the chair, making sure they are comfortably seated and properly aligned. Consider using cushions or pillows for added comfort.

Safety Straps: If necessary, secure the patient with safety straps or belts to prevent falls or sliding out of the chair. Ensure the patient can easily release the straps in case of an emergency.

Monitoring: Regularly check on the patient, especially if they have limited mobility, to ensure they are safe and comfortable. Address any discomfort or requests promptly.

Aids for Chair Patients:

Transfer Aids: Devices like transfer boards or sliding sheets can assist in moving patients from the bed to the chair or vice versa.

Walking Aids: For patients who can walk but need support, provide canes, walkers, or rollators to help them move around.

Assistive Devices: Depending on the patient's needs, provide reachers, dressing aids, or other adaptive equipment to support daily activities.

Management of Stretcher Patients:

Assessment: Determine the need for a stretcher based on the patient's condition. Stretcher patients are typically those who are bedridden, critically ill, or unable to sit upright.

Stretcher Preparation: Ensure the stretcher is clean, equipped with necessary bedding, and ready for patient transport.

Positioning: Gently move the patient onto the stretcher, ensuring they are comfortable and well-supported. Pay attention to the patient's head, neck, and limb positioning.

Safety Measures: Secure the patient with safety straps or restraints as needed, particularly during transportation or procedures.

Monitoring: Continuously monitor the patient's vital signs and comfort during transportation or while they are on the stretcher.

Aids for Stretcher Patients:

Patient Transfer Devices: Slide sheets, transfer boards, and inflatable lift cushions can be used to safely transfer patients to and from stretchers.

Pressure-Relieving Devices: Patients on stretchers for extended periods may require pressure-relieving mattresses or overlays to prevent pressure ulcers.

IV Poles and Accessories: If the patient requires intravenous fluids or medication, ensure that the stretcher is equipped with IV poles and necessary accessories.

Effective management of chair and stretcher patients, along with the appropriate use of aids, contributes to the safety, comfort, and overall well-being of patients in a healthcare setting. Healthcare professionals should be trained in proper patient handling techniques to minimize the risk of injury to both patients and staff.

Managing an unconscious patient

Managing an unconscious patient is a critical aspect of healthcare, as it requires immediate attention and specialized care. Here are the key steps in managing an unconscious patient:

Assessment and Safety:

Ensure your safety and the safety of others in the vicinity.

Check for responsiveness by calling the patient's name and gently shaking them.

Assess the patient's airway, breathing, and circulation (ABCs).

Airway Management:

Ensure the airway is clear of obstructions. If necessary, use the head-tilt, chin-lift or jaw-thrust maneuver to open the airway without moving the cervical spine.

Consider using an oropharyngeal or nasopharyngeal airway if needed.

Breathing:

Assess the patient's breathing by observing chest rise and fall.

Administer rescue breaths if the patient is not breathing, or if breathing is inadequate.

Consider oxygen supplementation if available.

Circulation:

Check for signs of circulation, such as a pulse. If no pulse is detected, initiate cardiopulmonary resuscitation (CPR).

Ensure the patient is placed on a firm, flat surface, and the chest compressions are performed effectively.

Call for Help:

If not already done, call for emergency medical assistance or inform the healthcare team if in a clinical setting.

Monitor Vital Signs:

Continuously monitor the patient's vital signs, including heart rate, blood pressure, and oxygen saturation if possible.

Identify and Treat Underlying Causes:

Identify and treat the underlying cause of unconsciousness if known (e.g., stroke, seizure, trauma, overdose).

Protect from Further Injury:

Prevent the patient from injuring themselves further by carefully immobilizing the head and neck if there's a risk of spinal injury.

Protect the patient from environmental hazards.

Medical History:

Gather information about the patient's medical history, including allergies, medications, and any pre-existing conditions if possible.

Family or Contacts:

If in a hospital or clinical setting, notify the patient's family or emergency contacts.

Transport to a Healthcare Facility:

Arrange for the patient's immediate transportation to a hospital or medical facility for further evaluation and treatment.

Documentation:

Maintain accurate records of the patient's condition, interventions performed, and any changes in their status.

Remember that managing an unconscious patient is a high-stakes situation, and it is essential to act quickly and efficiently. Immediate medical attention and ongoing monitoring are crucial for the best possible outcome. Healthcare professionals should follow established protocols and guidelines for unconscious patient management.

Questions to check understanding level of students-

1. What is the purpose of the initial contact process in a hospital department, and why is it important for both patients and healthcare providers?
2. What types of information are typically collected during the registration process when a patient arrives at a hospital department?
3. Explain the role of insurance verification during the initial contact in a hospital department. Why is it necessary?

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