

I'm gonna assess the **apical pulse**. "Ma'am pwede ba nato madunggan ang pagtibok sa imong heart, okay lang po i lift nato gamay imong shirt ma'am kay kailangan po i apply sa skin mo ang stethoscope para madunggan po nato, okay lang po?" Sige okay po ma'am.

I'll warm the diaphragm with my hand to avoid startling the patient which can alter the heart rate.

I'll place it on the **apex of the heart**, locating the **point of maximal impulse** and put on the earpiece to get the loudest sound of the heart. I'm gonna count the pulsation for 1 minute for accurate findings and note for the rate and rhythm and intensity of the quality.

—count. now that it's done, im gonna assist the patient to a comfortable manner." okay lang po ka ma'am?"

In no instance, the apical pulse count is greater than the radial pulse rate because it lies directly on the heart.

I'm gonna record it on the **jot down notebook**. "Ma'am bago ko nagsugod ganina naka ihi naka? ikapila po? nga pila man siya kabaso if i estimate nimo ma'am? okay po, nakalibang na ma'am?"

—ma'am humana po ang vital signs assessment, mubalik lang ko diri unya ma'am para I monitor balik imong condition ma'am ha thank you for the cooperation. Kung kailangan mi nimo for assistance ma'am, punduta lang po ang **signal cord** diria. Thank again ma'am.

Now I'm going to **arrange my equipment and leave the room**. I'll go back to the **nurses' station** and first report the findings to the **clinical instructor**. If there are any abnormalities, I will refer them immediately. "For patient Milan, the vital sign findings show no abnormalities and shows normal results"

After that, I will record the findings on the **TPR sheet, vital signs master sheet, and graphic chart**.

That's concludes my Vital Signs, Thank you ma'am.



While the **thermometer** was in place, I assessed the patient's **pulse rate** by using my **index and middle fingers** on the inner aspect of the wrist to **locate** the **radial pulse**, with my **thumb** providing support for moderate palpation to **avoid detecting my own pulse**. I counted for one full minute to determine the pulse rate, rhythm, and volume, and to note any abnormalities. I then measured the **respiratory rate** by observing the rise and fall of the patient's chest for one minute **without informing them, to prevent conscious control of breathing**.

Now im gonna get the **blood pressure** by first explaining the procedure and knowing what they did prior to the procedure

—ma'am unsa po imong gibuhad mga 30 minutes ago? naa po ba kay gibuhad na makahapo, nanigarilyo, inom ug kape? wala po, okay, i raise sa nato imong sleeve balik ma'am ha kay kuhaon nato imong blood pressure, okay lang po? comfortable ka?

I'm gonna place the **patient arm** comfortably at the table with the **palm** facing upward to **expose** the **brachial and radial artery, antecubital fossa**

I'm gonna **position myself** to see the **calibration** properly at eye level, making sure I'm not more than **3 feet away** for direct vision.

I'm gonna **cleanse the earpiece** and diaphragm of the stethoscope to be used later.

I'm gonna locate both the brachial and radial artery and remember it

What I'm going to do is **place the cuff** by first putting **two fingers** above the antecubital fossa to guide the **proper positioning**, making sure the cuff is **centered** over the anterior surface of the brachial artery so the pressure reading will be accurate. I'll **wrap** it properly without twisting it, and I'll make sure I can still insert two fingers to check that it isn't too tight.

I am going to use my fingertip to feel a strong pulsation, this is so that I know **where i'll place my stethoscope**

I'm gonna place my fingers in the **radial artery** and **inflate the cuff** until **i can no longer feel the pulse**, —, now im gonna put on the stethoscope, put the diaphragm directly over the brachial artery for accurate findings and inflate the cuff by adding **30 mm Hg**

After deflating and getting the results, I will now remove the cuff and make the patient **comfortable**. "Ma'am, 110/80 po imong bp, normal lang po siya maam, thank you po for the cooperation."

I remembered the first loud sound which is the systolic pressure and the last loud sound which is the diastolic pressure. Now **im gonna** set aside the equipment and record the result on my **jot down notebook**.

I am going to perform the Vital Signs checking in order to know the physiological status of the patient as well as their ability to regulate temperature, maintain local and systemic blood flow, and oxygenated tissue.

I'll read the patient's chart first, specifically the **doctor's order** and health history to **obtain necessary data**.

I'm gonna wash my hands to **deter the spread of microorganisms**

I'm gonna prepare my equipment. In this tray, I have a thermometer, stethoscope, sphygmomanometer, a jar with cotton and water, set of tissue paper, and a waste receptacle.

I'll put this on the bedside of the patient, start identifying myself, the patient, and explain the procedure to **gain cooperation** and so she'd know what is yet to be done.

—ma'am churva (verification ensures that im doing the procedure on the right patient)

I'm gonna rinse the **thermometer** using this **cotton ball with water** to approximate the surface through a firm twisting motion starting from the **bulb to the stem** to make sure to come in contact with the thermometer's entire surface.

now i will roll the sleeves of my patient

I'll ask and assist the patient to pat her axilla dry with **tissue paper** to **remove moisture** that could alter the temperature and place it on the deepest area and in the center to provide accurate findings. Now I'm gonna assist the patient to **lower down her arm** to her body with the forearm on her chest.

I'll leave **thermometer** for about 1-3 minutes or until the beep is heard because sufficient time for the axillary tissue to be in contact with the bulb is good for accuracy.

now, i will assess the pulse and respiratory rate while the thermometer is ongoing.

—**count pulse and respiratory for 1 minute**

Now I'm gonna remove the **thermometer** and assist the patient in rolling down the sleeves. (Looks at the thermo) then "ma'am 37c po imong temperature and normal lang po siya maam"

I'll clean the **thermometer** from the **stem to bulb** with the cotton ball **twice** making sure that the dripping will go straight to the **waste receptacle**, I'll dispose of the cotton ball to prevent the spread of microorganisms and avoid contamination. I will then return the thermometer to the **container**

I'm gonna record the temperature, pulse rate, and respiratory rate on the **jot down notebook** for the **documentation**