VITAL SIGNS (SKILLS DEMO) | Heart Rate, Respiratory Rate, Blood Pressure, Pulse Ox, Temperature

(0:02 - 0:12)

Hi everybody, I am thatNursingProf and welcome to my channel. In today's video, we're going to be talking about vital signs. So we're going to talk about them and then we're going to demonstrate them.

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The first thing I wanted to point out, these are all vital signs for adults. So if you're taking care of a child or an infant, these ranges are going to be very different. So these are the typical ranges for an adult.

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And the typical vitals we take on an adult are temperature, pulse, respirations, and blood pressure. We can also take their oxygen saturation and sometimes we will take their CO2. This one is less common, but if your patient's had any sort of anaesthesia or if they've had any sort of surgery, they're probably going to want a CO2 on your patient.

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So let's talk about the normal ranges first. If you're using a Fahrenheit scale, it's 96.8 to 100.4. And if you're going in Celsius, it's 36 to 38. Your pulse should be 60 to 100 beats per minute and it should be described as regular as opposed to irregular, okay? Your respiratory rate, how fast you're breathing, how many breaths you're taking in in one minute should be between 12 and 20.

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And again, should be described as regular. Your blood pressure can be anywhere between 120 and below for your systolic or 80 and below for your diastolic. And then I wanted to point out what this is, your pulse pressure.

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So your pulse pressure is your systolic, so your top number, minus your diastolic, which is your bottom number. So let's say, for example, our patient is 120 over 80. So 120 minus 80 is 40.

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So they would have a pulse pressure of 40. And that's okay, that's normal, right? That's in a good range. Having what's called a narrow pulse pressure, so less than 30, or a wide pulse

pressure, which is greater than 50, could be indicative that they're having some sort of heart problem.

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So that does matter, that is important. Our O2 should be greater than 95%. And we want to say how our patient is receiving oxygen.

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So if they're not on any sort of assistive device, like nasal cannula or a non-rebreather or whatever, we're just going to say greater than 95% on room air. If they're having oxygen administered, supplemental oxygen, we're going to say 97% on two litres nasal cannula. So when you document this stuff, you definitely want to put the number, but then you also want to say how they're getting their oxygen.

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And then the final thing I wanted to point out, this is your CO2. So this is the amount of like exhaled carbon dioxide. And the normal range is 35 to 45.

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So you want your patient to be within this normal range after surgery. So now that we've kind of reviewed the normal ranges for the adults, let's actually demonstrate this. Taking a temperature.

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There are several places you can take somebody's temperature and several different types of thermometers you could use. So for this demonstration, we just use like a basic oral thermometer. So you can use this orally, axillary, rectally if you have to.

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There's tympanic ones, there's temporal ones. It really all depends on what you have access to. So just making sure that you're using the correct device and using it correctly on your patients.

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To take somebody's radial pulse, you're going to see their thumb and then put two fingers slightly below onto the wrist. You're going to palpate for 30 seconds and then double that. So for example, if you palpate and you get 32, you're going to double that to 64 and their pulse will be 64.

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If there's any irregularities at all, you want to palpate for a full minute. The trick when it comes to taking pulse and respirations is you're going to leave your fingers there as if you're continuing to take the pulse. Take the pulse for 30 seconds and then check their respiratory rate for the other 30 seconds.

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You don't want to let the patient know that you're watching them breathe because then they could breathe a little bit strange or they can alter their breathing or even hold their breath. So that's the trick on how to take pulse and respirations. When taking a patient's blood pressure, the first thing you need to do is palpate the brachial artery and once you find it, now you're ready to actually take the blood pressure.

(5:03 - 5:30)

When taking the blood pressure, you're going to put the diaphragm of the stethoscope over the brachial artery and you're going to inflate the cuff about 30 millimetres of mercury above what you got when you palpated. So let's do that and then we're going to slowly release and you want to look at the ticker but you also want to listen for the sounds. Listening for the sounds is the most important part.

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So that first sound will be your systolic and then that second sound will be your diastolic. To take a pulse ox, you'll need a little oximeter device like this and it's very simple. You just place it on the finger and then turn the button on and this will tell us our O2 and it will also tell us our pulse.

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So for mine, 99% on room air and then my pulse is 77 beats per minute. So that was my video on how to take vital signs. Special thanks to my little nurse-in-training and I know it does seem like a little intimidating to do vital signs especially when you first learn them and you're a brand new student but if a six-year-old can do this, you guys can do this.

(6:17 - 6:24)

I have tonnes of confidence in you guys. Really, it's just practise. Practise on anybody that will let you do it.

(6:24 - 6:33)

I hope you found this helpful. Don't forget to like and subscribe. If you have any questions or comments, please let me know and if not, I'll see you on the next one.