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|  | <b>RESPIRATORY SERVICES</b>  | DATE CREATED: February 2008<br><br>DATE REVIEWED/REVISED: <b>September 2015</b> |
| <b>PROCEDURE</b>  | TITLE: <u>Pulmonary Diagnostics: Cystic Fibrosis Clinic</u> (Respiratory Therapy)<br><br>NUMBER: B-00-12-12124 | RELATED DOCUMENTS:  |

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### **SITE APPLICABILITY:**

ST. PAUL'S HOSPITAL

### **GENERAL INFORMATION:**

Respiratory Therapists from the Pulmonary Function Lab will provide bronchodilator administration and spirometry services to the Cystic Fibrosis Clinic. The CF clinic occurs each Monday and Wednesday morning (0900-1200), and each Wednesday and Friday afternoon (1300-1600).

The CF clinic provides a variety of services to CF patients including: Nutrition, Physiotherapy, Social Work, and Respirology. The Respiratory Therapist is an important member of the CF clinic team.

Adherence to hand hygiene practices by health care workers is the most important practice to prevent the transmission of infectious agents. Perform hand hygiene before and after contact with each patient, after removing gloves, and after contact with mucous membranes, respiratory secretions, or contaminated equipment.

### **REQUIRED SUPPLIES & EQUIPMENT:**

- CF clinic cart
- Microgard filters
- Nose clips
- Aerochambers
- Handheld spirometer
- Calibration syringe
- SpO<sub>2</sub> monitor
- Cavi-wipes tub
- Gloves
- Isolation gowns

### **PROCEDURE:**

1. Obtain CF clinic slate from Pulmonary Function Lab clerical staff and gather patient files.
2. Bring files, handheld spirometer, O<sub>2</sub> saturation probe, and the CF clinic cart (located in the 8B storage room) to the CF clinic and place next to the shelving unit by the exam rooms.
3. Calibrate the spirometer with the syringe located in the RT Report room.
4. Check in with the CF clinic office.

5. A magnetic white board is located at the office listing the clinic patient names, where the patient is located and all CF team members. A magnet must be placed in the 'PFT' slot to indicate that the RT is in the exam room with the patient. Once spirometry is finished, move the magnet back to its original position and place a checkmark in the 'PFT' slot to indicate that spirometry is completed.
6. Before entering the exam room, be sure to gown and glove.
7. Check the patient HR/SpO<sub>2</sub> and record the information on the flow sheet located in the patient's clinic chart prior to administering 2 puffs of salbutamol to the patient. Do not allow the patient to touch the MDI to minimize the risk of cross contamination.
8. Return to the exam room 10 minutes post salbutamol to do spirometry.
9. Enter patient information into the handheld spirometer.
10. Conduct spirometry (Refer to RTD7335).
11. Dispose of filter and nose clips when finished and wipe down the spirometer with Cavi Wipes.
12. Recalibrate the SpiroPro with a **new** pneumotach after every patient.
13. Delete all but the best Flow Volume Loop from the spirometer and print 3 copies of report.
14. Place one copy of the spirometry report in the CF patient chart and transcribe the FVC and FEV<sub>1</sub> into the chart flow sheet. Remember to collect the requisition from the front of the chart.
15. The remaining 2 report copies along with the requisition are placed in the blue PF patient chart. Bring the charts back to the PF lab once you finish clinic.
16. If you are testing an Inpatient, print an extra copy of the final report so a copy can be placed in the CF clinic chart. Put this copy in the blue folder by the fax machine in the PF front office.

**REVIEWED BY:**

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