



PRACTICE CASE / ID

DATE

SETTING

How hard is the patient working to breathe, and why?

WHAT MATTERS MOST

- Dyspnea timing and triggers
- Smoking in pack-years and exposures
- SpO2 with oxygen source and flow
- Work of breathing

OFTEN MISSED

- Oxygen source with every SpO2
- Baseline function or home oxygen
- Inhaler technique and adherence

S SUBJECTIVE**Chief complaint**

HPI Dyspnea, cough, sputum, wheeze, triggers, exertional limit.

Smoking / exposures Pack-years, occupational, environmental.

Baseline Home oxygen, prior intubations, exacerbations this year.

Meds Inhalers and technique.

O OBJECTIVE

Vital signs SpO2 with oxygen source and flow.

Exam Work of breathing, accessory muscles, ability to speak in full sentences, breath sounds.

Data Peak flow, ABG, chest imaging, PFTs.

A ASSESSMENT

Diagnosis With severity.

Trigger

P PLAN

Treatment Including oxygen goal.

Education Inhaler technique, trigger avoidance, smoking cessation.

Follow-up
