
 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-E-69-P01-S11
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	Document Type:	Standard Operating Procedure
	Page Number:	2 of 4
	Department/Section:	Respiratory Therapy Services
	Document Title:	<b>VIBRACARE PERCUSSION THERAPY</b>

6. The whole procedure takes 15-20 minutes to complete.
7. Ensure that the patient is safe and secure at all times during their therapy.

### **PROCEDURE:**

1. The Respiratory Therapist checks the chart for the following information:
  - 1.1. Physician's order
  - 1.2. Patient diagnosis. (Vibracare Percussor is contraindicated for use in some patients due to its deep vibratory and percussion movement.
2. The Respiratory Therapist identifies the patient by using the two (2) patient identifiers.
3. The Respiratory Therapist introduces self and explains the procedure to the patient.
4. The Respiratory Therapist assesses the patient:
  - 4.1. Inspects for incisions and that monitoring leads, intravenous tubing or oxygen therapy equipment is connected to the patient to ensure continued function during the procedure.
  - 4.2. Checks patient's vital signs. Patient should be stable during the procedure.
  - 4.3. Auscultates chest and identifies appropriate lobes or segments for Vibracare percussion or as indicated by the physician in the patient's chart.
  - 4.4. Measures SpO2 if hypoxemia is suspected.
  - 4.5. Monitors patient's subjective response.
  - 4.6. Monitors arrhythmia, breathing pattern, sputum production, skin color before, during and after the procedure.
5. The Respiratory Therapist positions the patient comfortably according to the proper postural drainage position or as ordered by the physician.
6. The Respiratory Therapist assembles G5 Vibracare Percussor and chooses the appropriate applicator for effective treatment.
7. The Respiratory Therapist attaches the VP to electrical outlet.
8. The Respiratory Therapist holds VP applicator handle and turn on the machine.




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B.S. Aquino Drive,  
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9. The Respiratory Therapist places the nylon-cushioned section of the applicator on the segment or lobe to be mobilized. Applicator handle should be positioned so that arrow points in the direction that mucus will be mobilized.
10. The Respiratory Therapist holds in place for 1 to 1.5 minutes. (To increase the percussive effect of the VP, hold the handle at the end of the connecting cable furthest away from the arrow. To reduce the percussive effect, hold the handle by the round palm section.)
11. The Respiratory Therapist instructs the patient to inhale deeply, "huff and cough" during the procedure in order to clear and mobilize secretions for expectoration.
12. The Respiratory Therapist proceeds to the next bronchial segment and repeats procedure #11 until all segments have been cleared.
13. The Respiratory Therapist turns off the machine, gathers the equipment and returns the equipment, inside the bag.
14. The Respiratory Therapist ensures that the patient is safe and secure before leaving the room.
15. The Respiratory Therapist performs hand hygiene after the procedure.
16. The Respiratory Therapist documents the procedure. Flow sheet should be provided in the patient's chart. Records date and time treatment started and ended. Charts any complications or side effects encountered.
17. The whole procedure takes twenty (20) minutes to complete.

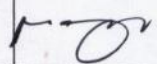

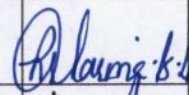
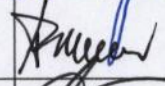
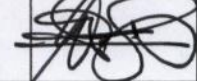
#### **REFERENCE:**

1. Vibracare Disassembly Instructions
2. Vibraacare Service Manual
3. G5 Medical Devices Vibracare Operating Manual


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Negros Occidental,  
6100

**APPROVAL:**

	Name/Title	Signature	Date
Prepared by:	<b>SHIRLEY B. MALAGA, RMT, RTRP</b> RTS Supervisor		3.7.2022
Reviewed:	<b>DENNIS C. ESCALONA, MN, FPCHA, FPSQua</b> Quality Assurance Supervisor		3-7.2022
Recommending Approval:	<b>ROSARIO D. ABARING, RN, MN, PhD, FPCHA</b> Ancillary Services Division Officer		3-7-2022
	<b>HENRY F. ALAVAREN, MD, FPSMID, FPSQua</b> Total Quality Division Officer		3/7/2022
Approved:	<b>GENESIS GOLDI D. GOLINGAN</b> President and CEO		3/17/22



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	Document Type:	Work Instruction
	Page Number:	1 of 2
	Department/Section:	Respiratory Therapy Services
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B.S. Aquino Drive,  
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KEY TASKS	PERSON RESPONSIBLE
1. Checks the physician's order and functionality of the equipment prior to the procedure.	RTS Staff
2. Reviews the patient's chart for the ordered settings.	
3. Verifies the patient's identity.	
4. Assesses the patient prior to the procedure.	
5. Positions the patient comfortably according to the proper postural drainage position or as ordered by the physician.	
6. Does the procedure.	
7. Does after care and documents the procedure in the patient's chart.	



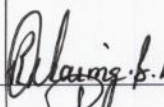




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**APPROVAL:**

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Prepared by:	<b>SHIRLEY B. MALAGA, RMT, RTRP</b> RTS Supervisor		7.6.2022
Reviewed:	<b>DENNIS C. ESCALONA, MN, FPCHA, FPSQua</b> Quality Assurance Supervisor		07-06-2022
Recommending Approval:	<b>ROSARIO D. ABARING, RN, MN, PhD, FPCHA</b> Ancillary Services Division Officer		07.08.2022
	<b>FREDERIC IVAN L. TING, MD</b> OIC- Total Quality Division		7/8/22
Approved:	<b>GENESIS GOLDI D. GOLINGAN</b> President and CEO		

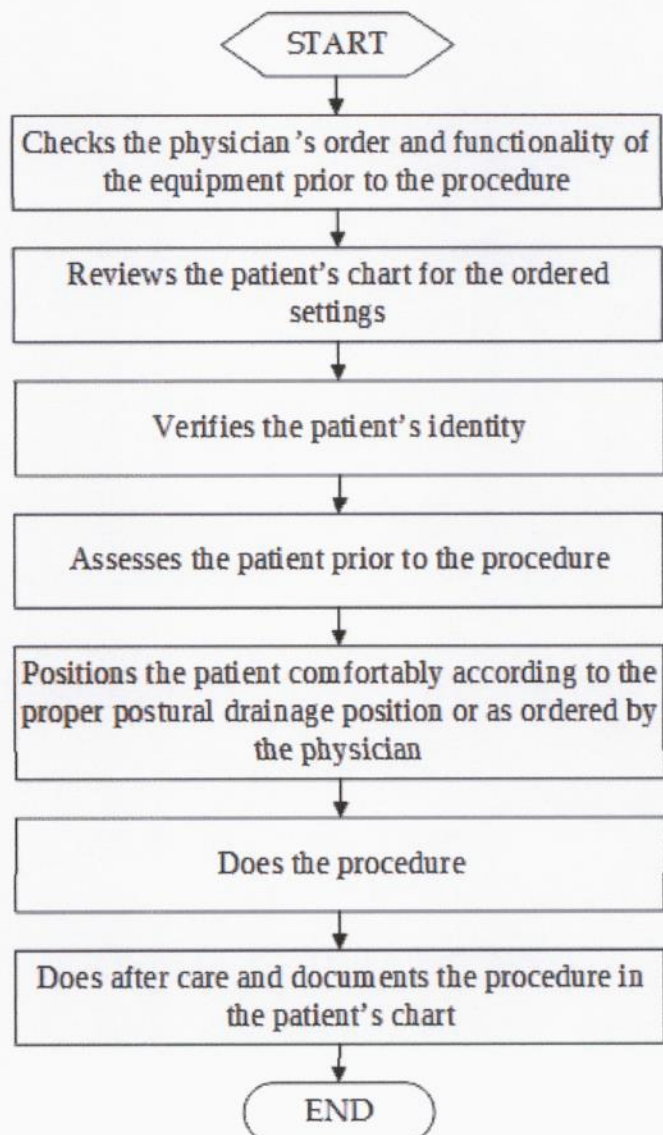



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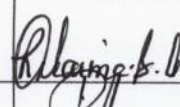

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Document Type:	Flowchart
Page Number:	1 of 2
Department/Section:	Respiratory Therapy Services
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## FLOWCHART



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Recommending Approval:	<b>ROSARIO D. ABARING, MAN, PhD</b> Ancillary Division Officer		07.06.2022
	<b>FREDERIC IVAN L. TING, MD</b> OIC-Total Quality Division		7/8/22
Approved:	<b>GENESIS GOLDI D. GOLINGAN</b> President and CEO		