

Standard communication during enrollment phase

Hello, sir/mam. I am a medical staff in this department. My name is ***.(show them the work card). Because we are conducting a study about the effects that different positions have on patients using high flow nasal oxygen therapy, and you meet the conditions for participation without any contraindication. We would like to invite you to join this study.

If you join this study, the interventions may help you to relieve your symptoms, reduce the possibility of endotracheal intubation and even help you avoid further development of the disease, recover faster, and be discharged quicker.

If you agree to join this study, you will be randomly assigned to one of our designed research groups. Then trained experienced nurses will guide you to take the relevant lying position and make you feel comfortable. And you need to strictly obey our instructions and try to keep the required position as long as possible each time. According to your group and your health situation, nurses will take your arterial blood 1-3 times a day to have tests, based on the doctor's judgment.

The position you will take has not previously reported any serious complications and was tested by our staff to ensure safety before applying it to you. When you take this position, we will closely monitor you, and investigators will visit hourly to ensure your safety. We will use pillows to protect your skin from being compressed. Once you feel palpitations, chest tightness, or dyspnea, please immediately sit up and call us; we will check you immediately. You have the right to exit the trial whenever you want, and we will suspend your test when your doctor thinks you are not fit to continue the practice. If you have irreversible damage due to our intervention, you will be compensated by our department. Your personal treatment-related information and data will only be used for diagnosis, treatment, nursing care, and this research, and we will not expose your privacy. Your blood is only for testing, discarded after use, not for other use.

Standard communication during implementation phase

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Standard communication process for awake prone position

Explain before operation

Hello sir/madam, because you have an infection in your lungs, your panting tiredness is obvious. Now your doctor has prescribed prone ventilation for you, which is to let you lie on your stomach. The purpose is to reduce your wheezing symptoms and help you recover faster. There are many patients with similar conditions to you lie on their stomachs, we can see that the index of his hypoxia (SpO₂) improves quickly (within a few minutes). This operation is simple and free of charge, and does not add financial burden to you, but it requires your cooperation and persistence. We are here to guide you and help you to better master and implement this skill. Do you think it is convenient for you now? Have you been coughing up blood recently? (If so, ask for color, quantity, character, and judge whether it is acute massive bleeding) Have you eaten in the last hour? Do you need to go to the bathroom?

Explain during operation

Ask the patient if there is any discomfort, and solve it in time.

- — If you cannot lie completely supine, we can raise the head of the bed by 10-20 °
- — If you feel that the U-shaped pillow is strangling the neck, put the U-shaped pillow down and put the chin on the U-shaped pillow or other pillows to keep the head and back level (to ensure that the neck does not sag or fall back)
- — If you feel pressure on your chest or abdomen, move the pillow up or down to let that part hang in the air
- — If you feel bored, let the patient play with mobile phone, watch TV/video, listen to music, etc., to divert attention

Explanation after operation

In order to achieve better results, experts recommend that the longer the prone time, the better, and the current recommended time ranges from 6-12 hours. This is difficult to achieve at one time, but it can be divided into multiple times to get closer to this goal. If you don't feel uncomfortable, try to take prone position a little longer at a time, and take it a few more times. If you are not used to it, it does not matter, we set a minimum goal, at least one hour each time, try to increase the number of times you take prone position, and then slowly increase the time after you get used to it. Don't be stressed, we will just try our best to achieve the longest time we can, this is better than doing nothing. If you have any discomfort in the middle, please let us know in time and we will solve it for you immediately.

Patient Rejection Communication Process

Ask the patient: Do you have any concerns? (To give targeted explanations later)

Before operation

Doubt effect and authenticity:

During the Covid-19 period, including now, many places and many patients are using this method. It is simple, fast and effective. If you don't believe it, you can check it. It is recommended in the guidelines issued by the state. Of course, this may not be effective for everyone, it is mainly related to diseases and individuals. In theory, you are eligible for the prone position, mainly depending on your willingness and cooperation. But so many people like you use it effectively without spending money, even if it doesn't work for you, there is not much loss. But if the symptoms are relieved, it will not be far from being discharged from the hospital. You and your money get will benefit from it, so why not trying it?

Feel troublesome:

In fact, this operation itself is not troublesome, just lie on the stomach. After a few time, many patients will be able to do it themselves. But it's a matter of persistence. If you don't think you will persist, we will supervise and urge you. Now we all advocate rapid

recovery, and your speedy recovery is also our wish and goal. We work together to get you discharge from the hospital as soon as possible. If you like to sleep on your stomach yourself, you can even do it when you are sleeping. If you don't , then just regard it as a simple and easy way to get treatment.

During operation

The patient refuses to cushion the pillow:

The pillow is to reduce the pressure on the chest and abdomen, and at the same time reduce the problem of neck and waist pain after lying for a long time, so that you can be more comfortable, persist for a longer time, and the effect will possibly be better. If you feel that the pillow's position is not good in the middle, you can move your body to adjust it yourself, or ask us or your family to help you adjust the position of the pillow.

The patient feels too hot:

We have cooling stickers, water pads and small fans for you to use to help you cool down. Try it first to see if it will be better. (If the patient still refuse, let the patient have a rest first and choose a time when the patient feels comfortable (not hot))

After operation

Feel uncomfortable

Where do you feel uncomfortable? It's normal for you to feel uncomfortable, probably because...(the reason) we will change it to.. It should be solved, will that be ok for you?

If the patient does not agree with the improvement measures: how do you think the changes are more acceptable to you? (Discuss with the patient and choose an improvement plan that the patient can accept.)

I don't think it works

If the patient's vital signs improve:

Let's see, this indicator before you took prone position was..., After you took prone position was.. (It is best to let the patient see for himself, such as wearing a portable finger pulse oxygen monitoring, the patient can see the changes and contrasts in real time, so as to enhance the patient's confidence in the prone position.) There is improvement, but short-term changes, you may not feel it yourself. Let's do it a few more times, and over time, you'll be able to feel it slowly.

If the patient's vital signs do not improve significantly

This may be related to the short time you lie /the late start time. Because you don't have any discomfort after lying down, we will try to take prone position for a longer time next time to see if it will be better after the accumulated time is longer. Because after all, experts suggest that the time is still very long, will that be ok for you?

Standard communication process for lateral position

Explanation before action

Hello sir/madam, because you have an infection in your lungs, your panting tiredness is evident, and take a supine position all the time is not conducive to sputum discharge and lung anti-inflammatory. Sleeping on your side can help you use gravity to draw out the phlegm, reduce inflammation faster, breathe smoother, and avoid snoring, so you can get better faster. Your doctor ask you to sleep on your side. Do you think it is convenient for you now? Have you been coughing up blood recently? (If so, ask for color, quantity, character, and judge whether it is acute massive bleeding) Have you eaten in the last hour? Do you need to go to the bathroom?

Explanation during operation

(Ask the patient if there is any discomfort, and solve it in time.)

- — If you cannot lie completely supine, I can raise the head of the bed by 10-20 °
- — If you feel pain in your hip, we can use a pressure relief tool such as a pillow or a pressure relief patch to reduce pressure
- — If you feel bored, you could play on the mobile phone, watch TV/video, listen to music, etc., to divert attention so you can feel time flies faster.

Explanation after operation

In order to achieve better results, please spend more than an hour on each side, and try to sustain as long as possible each time. If you feel unbearable, sleep on

the other side. And same for the other side, try to keep on each side more than an hour. If there is no discomfort, try to last as long as possible each time. If you feel unbearable, sleep on the other side. Alternate on both sides.

In addition to having meals, doing atomization, going to the toilet and other things that must be done, try to sleep on your side at other times. The longer the total time to sleep on your side, the better.

If you feel any discomfort in the middle, please let us know in time, and we will solve it for you in time.

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Patient Refusal Communication Process

Ask the patient: Do you have any concerns? (To give targeted explanations later)

Before operation

I have no phlegm

The auscultation assesses whether the patient really has no phlegm sounds. If there are: you just have phlegm, the phlegm is too thick/you have no strength to cough up, we can better help to remove phlegm through treatment, combined with the lateral position.

If not: the lateral position can not only help expectoration, but also reduce the impact of gravity on a specific position in the lungs, promote the absorption of inflammation, and help you recover. It is very effective for some patients to use the side position during the Covid-19, but it is more effective to use the side position for a long time (6-12 hours), so we encourage you to sleep on the side for as long as possible.

Doubt effect and authenticity

We have a method to help expectoration called posture drainage, which is achieved by changing the posture. This is written in the textbook, and you can also check it online. At the same time, it is very effective for some patients to use the side position during the Covid-19, but it is more effective to lie on the side for a long time (6-12 hours), so we encourage you to sleep on the side for as long as possible.

Feel troublesome

In fact, this operation itself is not troublesome, just lie sideways. But it's a matter of persistence. If you don't think you will persist, we will supervise and urge you. Now we all advocate rapid recovery, and your speedy recovery is also our wish and goal. We work together to get you discharge as soon as possible. If you like to sleep on sideways, you can even do it when you are sleeping. If you don't usually have the habit of sleeping on sideways, just regard it as you are getting a treatment simply by changing a position.

During operation

The patient cannot lie supine

If you really can't lie on your back, I can also raise the head of the bed a little higher (10-20 °). (If it still doesn't work, raise the head of the bed to a height that the patient can bear. And note in the data collection form.)

Pain in the compressed area when the patient is lying on his side

I will give you a pad/pillow to get there decompressed, and you will feel better. (Depending on the patient's economic level and what they already have, such as water-cushions, folded quilt covers, small pillows or decompression pads for protection)

After operation

Feel uncomfortable

Where do you feel uncomfortable? It's normal for you to feel uncomfortable, probably because.....(the reason). We will change it to... (solutions to it), it should be solved, will that be ok?

If the patient does not agree with the improvement measures: how do you think the changes are more acceptable to you? (Discuss with the patient and choose an improvement plan that the patient can accept.)

I don't think it works

If the patient's vital signs improve:

Please look at this, before you lie sideways this indicator was... After you lay sideways is... (It is best to let the patient see for himself, such as wearing a portable finger pulse oxygen monitoring, the patient can see the changes and contrasts in real time, so as to enhance the patient's confidence in the prone position.) There is improvement.

But in a short period of time, you may not feel it yourself. Let's do it a few more times, and over time, you'll be able to feel it slowly.

If the patient's vital signs do not improve significantly

This may be related to the short time you lie sideways/the late start time. Because you don't have any discomfort after lying down, we can try to lie down for a longer time next time to see if it will be better after the accumulated time is longer. Because after all, experts suggest that the time is still very long, will that be ok with you?

If the patient coughs more sputum

You have more sputum on your side, which is a good thing. When the sputum got out, your infection will get better faster.

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