

POSTURAL DRAINAGE

POPULATION:

CLIENTS WHO HAVE DEVELOPMENT OF CONSOLIDATION AND OR FLUID THAT MUST BE REMOVED

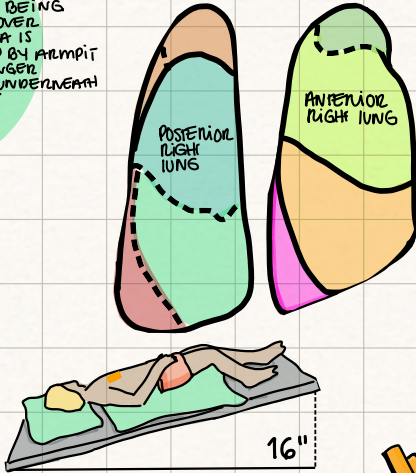
ASTHMA
BRONCHITIS
BRONCHIECTASIS
CYSTIC FIBROSIS
PNEUMONIA

CONTRAINDICATIONS:
LONGESTIVE HEART FAILURE
AORTIC ANEURYSM
PULMONARY EMBOLISM
PNEUMOTHORAX
INCREASED ICP > 20
SEVERE UNCONTROLLED HT
RECENT MI.

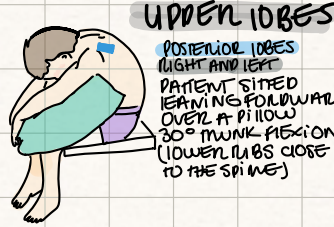
SET OF SPECIFIC POSITIONS TO DRAIN FLUID FROM ONE PART OF THE LUNGS TOWARDS THE TRACHEA FOR REMOVAL.

POSTURAL DRAINAGE ALONE IS NOT EFFECTIVE

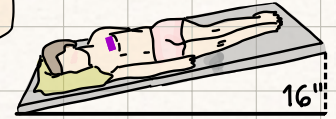
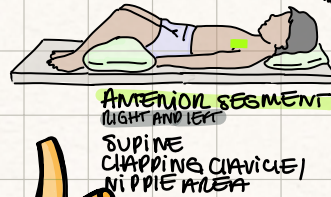
IF FEMALE PATIENT IS BEING TREATED OVER NIPPLE AREA IS SUBSTITUTED BY ARLPIT AREA (2) FINGER EXTENDED UNDERNEATH THE BREAST



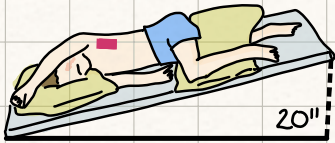
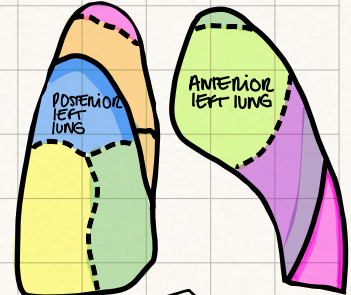
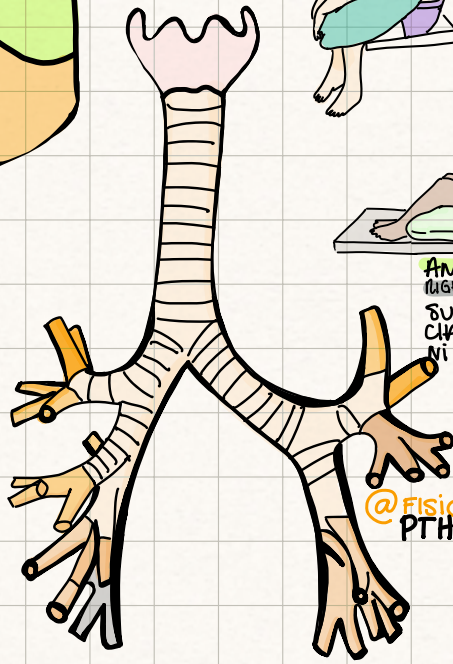
MIDDLE LOBE (RIGHT LUNG ONLY)
TRENDELENBURG 16"
LEFT SIDE HING 1/4
TURNS BACKWARD
CLAPS OVER MIDDLE AREA



APICAL SEGMENT (RIGHT AND LEFT)
PATIENT SITTING LEANING BACK 30°
THERAPIST CLAPS ON TOP OF SCAPULA / CLAVICLE

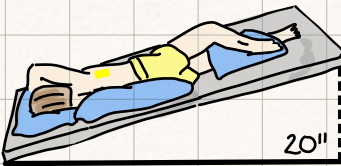
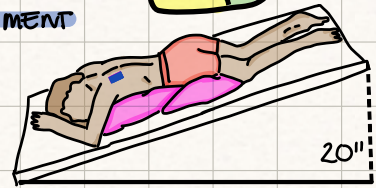


LEFT UPPER LOBE SINGLE SEGMENT (JUST LEFT)
FOOT OF BED ELEVATED 16" (TRENDELENBURG)
RIGHT SIDE HING
TURNS BACKWARD
THERAPIST CLAP OVER MIDDLE AREA



LOWER LOBES
ANTERIOR BASAL SEGMENTS (RIGHT AND LEFT)
FOOT OF THE BED ELEVATED 20"
PATIENT LIES ON SIDE LYING POSITION

POSTERIOR BASAL SEGMENT (RIGHT AND LEFT)
20" ELEVATION (TRENDELENBURG)
PATIENT LIES DOWN ON THE ABDOMEN
HEAD DOWN (2) PILLOW UNDER HIPS



LATERAL BASAL SEGMENT (RIGHT AND LEFT)
FOOT OF THE BED ELEVATED 20" (TRENDELENBURG)
PATIENT LIES ON ABDOMEN THEN ROTATES 1/4 UPWARD/BACKWARD

SUPERIOR SEGMENT OF LOWER LOBES (RIGHT AND LEFT)
PHONE OVER 2 PILLOWS
HEAD DOWN
ALLOW EASY ACCESS TO APPROPRIATE PART OF POSTERIOR LUNGS
CLAP AT TIP OF SCAPULA.



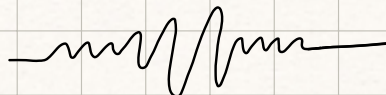
BREATHING PATTERNS

(BONUS REVIEW)

CHEYNE-STOKES RESPIRATIONS

APNEA FOLLOW BY A GRADUAL DECREASE AND BACK TO APNEA

CHF, SMOKE
TBI, AND OPiOIDS



KUSSMAUL RESPIRATIONS

CYCLES OF MAX INHALATION

LABOR BREATHING PATTERN

DECREASED BLOOD PH
DIABETIC KETO ACIDOSIS / CO2 POISONING

