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# Effective Coughing

Patient name: \_\_\_\_\_

NRS  
DATE INITIAL

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Admission: \_\_\_\_\_

NRS  
DATE INITIAL

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- I. The client/caregiver can list benefits of controlled, effective coughing.
  - A. To conserve energy and decrease fatigue
  - B. To remove mucus from airways
  - C. To prevent respiratory complications
- II. The client/caregiver can demonstrate positioning methods for effective coughing.
  - A. Sit upright on chair or edge of bed with feet firmly on the floor, leaning forward slightly.
  - B. If unable to sit upright, elevate head of bed and flex knees, or lie on the side keeping upper body flexed forward and knees bent toward body.
- III. The client/caregiver can demonstrate controlled coughing.
  - A. Take a deep breath, placing your hands on your stomach while allowing stomach to expand.
  - B. Hold breath for 2 seconds.
  - C. Cough twice with mouth open. The first cough loosens mucus and the second cough helps to remove it.
  - D. Cough the mucus into a tissue and dispose of it.
  - E. Breath in slowly through nose. Fast mouth breathing can drive mucus back into lungs.
- IV. The client/caregiver can demonstrate cascade coughing, another version of controlled coughing.
  - A. Take a slow deep breath and contract abdominal muscles.
- V. The client/caregiver can list other general measures to promote effective coughing and clearing of airways.
  - A. Take pain medication as needed.
  - B. Support incision with a pillow to decrease pain when coughing.
  - C. Increase fluids to 2000 ml per day, unless contraindicated, to thin mucus.
  - D. Use medications as ordered.
- VI. The client/caregiver can list possible complications of ineffective coughing.
  - A. Collapse of airways
  - B. Rupture of alveoli
  - C. Pneumothorax

## REFERENCES

- Canobbio, M. M. (2006). *Mosby's handbook of patient teaching*. St. Louis: Mosby Inc.
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- Timby, B. K. (2005). *Fundamental nursing skills and concepts*. Philadelphia: J. B. Lippincott Williams & Wilkins.