

# Dyspnea Monitoring Tool

## Is the resident able to self-report breathlessness?

Yes – monitor using the Modified Borg scale (see page 2) → Baseline score: \_\_\_\_\_

No – monitor using Respiratory Distress Observation Scale (see page 2) → Baseline score: \_\_\_\_\_

Date (dd/mmm /yyyy)	Time	Dyspnea Scale Score <input type="checkbox"/> Modified Borg <input type="checkbox"/> RDOS	Salbutamol given? If yes, number (#) of puffs given?	Other Interventions <sup>1</sup>	Response	Initials
			<input type="checkbox"/> Yes <input type="checkbox"/> No # of puffs: _____			
			<input type="checkbox"/> Yes <input type="checkbox"/> No # of puffs: _____			
			<input type="checkbox"/> Yes <input type="checkbox"/> No # of puffs: _____			
			<input type="checkbox"/> Yes <input type="checkbox"/> No # of puffs: _____			
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			<input type="checkbox"/> Yes <input type="checkbox"/> No # of puffs: _____			

1. Examples of interventions: positioning, fan for airflow breathing techniques, reassurance/relaxation, other medications

## Modified Borg Scale

0	No breathlessness* at all
0.5	Very, very slight (just noticeable)
1	Very slight
2	Slight breathlessness
3	Moderate
4	Somewhat severe
5	Severe breathlessness
6	
7	Very severe breathlessness
8	
9	Very, very severe (almost maximal)
10	Maximal

**Figure 1**

Modified Borg scale. (Note: The word "breathlessness" was added in our version of the scale for clarification.) (From Burdon JGW, Juniper EF, Killian KJ, Hargrave FE, Campbell EJM. The perception of breathlessness in asthma. *Am Rev Respir Dis* 1982;126:825-8. Official Journal of the American Thoracic Society. © by the American Lung Association.)

(From Kendrick KR, Baxi SC, and Smith RM. Usefulness of the modified 0-10 Borg scale in assessing the degree of dyspnea in patients with COPD and asthma. *J Emerg Nurs* 2000; 26:216-22.)

## Respiratory Distress Observation Tool (RDOS)

APPENDIX A. Respiratory Distress Observation Scale <sup>®</sup>				
Variable	0 points	1 point	2 points	Total
Heart rate per minute	<90 beats	90–109 beats	≥110 beats	
Respiratory rate per minute	≤18 breaths	19–30 breaths	>30 breaths	
Restlessness: nonpurposeful movements	None	Occasional, slight movements	Frequent movements	
Paradoxical breathing pattern: abdomen moves in on inspiration	None		Present	
Accessory muscle use: rise in clavicle during inspiration	None	Slight rise	Pronounced rise	
Grunting at end-expiration: guttural sound	None		Present	
Nasal flaring: involuntary movement of nares	None		Present	
Look of fear	None		Eyes wide open, facial muscles tense, brow furrowed, mouth open, teeth together	
Total				

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**Instruction for use:**

1. RDOS is not a substitute for patient self-report if able.
2. RDOS is an adult assessment tool.
3. RDOS cannot be used when the patient is paralyzed with a neuromuscular blocking agent.
4. Count respiratory and heart rates for one-minute; auscultate if necessary.
5. Grunting may be audible with intubated patients on auscultation.
6. Fearful facial expressions:



(From Campbell ML, Templin T, and Walch J. A Respiratory Distress Observation Scale for Patients Unable to Self-Report Dyspnea. *J Palliat Med* 2010; 13: 285-9.)