OSCE checklist for deep breathing and coughing exercises

An OSCE checklist for deep breathing and coughing exercises covers explaining why they help after surgery, checking pain is controlled, sitting the patient upright, supporting the wound, teaching slow deep breaths and a supported cough or huff, and watching the patient's breathing and observations.

OSCE checklist for deep breathing and coughing exercises: steps to practise

1. Wash your hands, introduce yourself, confirm identity (name, date of birth and wristband), explain that the exercises help prevent chest infection and lung collapse, and gain consent.
2. Ask about pain and check the pain score. If pain is not controlled, tell the nurse in charge so prescribed pain relief can be given and has time to work first.
3. Check the patient's recent observations and any instructions from the surgical team or physiotherapist.
4. Sit the patient upright in a chair or well supported in bed.
5. Show how to hold a pillow or folded towel firmly against the wound to support it when coughing.
6. Teach slow deep breathing: breathe in slowly through the nose, hold briefly if able, and breathe out slowly through the mouth.
7. Ask the patient to repeat this a few times, then rest and breathe normally in between.
8. Teach a supported cough or huff: take a deep breath, support the wound and cough or huff out through an open mouth. Have tissues and a sputum pot ready.
9. Use an incentive spirometer only if one has been ordered, and show how to use it.
10. Stop and tell the nurse in charge if the patient has severe pain, dizziness, increasing breathlessness, chest pain or blood in the sputum, and check their observations (using NEWS2 for adults).
11. Wash your hands and record how the patient coped, any sputum (colour and amount) and their pain, and encourage regular practice.

What candidates commonly forget

- Not checking pain is controlled first
- Not showing how to support the wound
- Not sitting the patient upright
- Asking for too many repetitions without rest
- Not reporting breathlessness, chest pain or blood in the sputum
- Not recording sputum

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Next, try Pain that prevents coughing after surgery. Back to the medical surgical nursing OSCE page: medical surgical nursing OSCE, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for deep breathing and coughing?

Wash hands, confirm identity and consent, check pain is controlled, sit upright, support the wound, teach slow deep breaths and a supported cough or huff, use a spirometer if ordered, watch the patient, report concerns and record.

Why are these exercises given after surgery?

They help open the lungs and clear secretions, which reduces the risk of chest infection.

What is an incentive spirometer?

A device that gives visual feedback while the patient takes a slow deep breath. Use it only if it has been ordered.

Sources

- NMC: standards of proficiency for registered nurses
- NICE NG180: perioperative care in adults

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.