

Hypovolemia

Definition	Loss of fluid
Clinical	- Weight loss
Manifestations	- Decreased turgor - Oliguria - Weak rapid pulse
Nx interventions	- Monitor Ins and Outs - Monitor vital signs and turgor - Note concentration of urine

Hypervolemia

Definition	Retention of water and Sodium
Clinical	- Edema
Manifestations	- Bounding pulse - Increased weight
Nx Interventions	- Measure ins and outs - Weigh patient daily - Monitor for edema - Listen for crackles in the lungs

Hypocalcemia

Definition	Decreased calcium Bed rest increases risk
Clinical Manifestations	- increased neural excitability - Seizures
Nx Interventions	- Initiate seizure precautions Increase calcium intake
Normal:	2.25-2.75 mmol/L

Hypercalcemia

Definition	Increased calcium
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Hypercalcemia (cont)

Clinical Manifestations	- Dehydration - Constipation - Anorexia - Paralytic ileus - confusion - lethargy
Nx Interventions	- Drink 2.5-3.5L/day - Monitor cardiac function

Parental Fluid Therapy

Isotonic	NS (308), D5W (252), RL Cells do not shrink
Hypotonic	0.45% NaCl (154) Cause cells to swell
Hypertonic	5% Dextrose Cells will shrink

Glossary Terms

Anaphylactic shock	Biochemical mediators
Cardiogenic shock	Circulatory shock
Colloid cells	Crystalloids
Hypovolemic shock	multi-organ dysfunction syndrome
Neurogenic shock	Septic shock
Shock	Systemic inflammatory response syndrome
Gluconeogenesis	Guided imagery
Hyperplasia	Hypoxia
Metaplasia	Negative feedback
Steady state	Stress
Adaptation	Adrenocorticotrophic hormone (ACTH)
Antidiuretic hormone (ADH)	Catecholamines
Coping	Dysplasia
Glucocorticoids	Acidosis

Glossary Terms (cont)

Active transport	Alkalosis
Diffusion	Homeostasis
Hydrostatic pressure	Hypertonic solution
Hypotonic solution	Isotonic solution
Osmolality	Osmolarity
Osmosis	Tonicity

Hyponatremia

Definition	Low sodium
Clinical Manifestations	- Dry mucosa - Decreased turgor - Headache - Cramping
Nx Interventions	- Monitor ins and outs - Assess neurologic state - Increase salt intake
Normal:	13-145mmol/L

Hypernatremia

Definition	Increased sodium levels
Clinical Manifestations	- Dry swollen tongue - Hypotension - Pulmonary edema
Nx Interventions	- Monitor ins and outs - Gather medical history - Gather record of medications - Assess body temperature - Note behavioural changes

Metabolic Acidosis

Definition Low pH r/t Increased H+ and decreased bicarb.

Clinical - Headache

Manifestations

- Confusion
- Drowsiness
- Decreased respirations
- Decreased cardiac output

Nx -Administer bicarb.

Interventions - Remove chloride source

Metabolic Alkalosis

Definition High pH r/t Decreased H+ and increased bicarb

Clinical and manifestations Tingling in fingers and toes

Nx - Correct underlying problem

Interventions

- Replace fluids with NS

Stress management: Nursing Interventions

Promote healthy lifestyle

Enhance coping strategies

Teach relaxation techniques

Progressive muscle relaxation

Guided imagery

Recommend support and therapy groups

General Shock Management

Support respiratory system with oxygen or mechanical ventilation

Fluid replacement

Vasoactive medications

Nutritional Support

Hypokalemia

Definition Decreased potassium

Clinical -Fatigue

Manifestations

- Leg cramps
- Decreased bowel motility
- Decreased blood pressure

Nx - Increase potassium

Interventions

- ECG
- monitor ins and outs
- Monitor for early signs

Normal: 3.5-4.5 mmol/L

Hyperkalemia

Definition Increased potassium
Disturbs cardiac function

Nx - Note dysrhythmias and

Interventions muscle weakness
- Restrict potassium intake

Respiratory Acidosis

Definition pH <7.35 and PaCO₂ > 42mmHg

Clinical - Increased respirations

Manifestations and BP
- Mental cloudiness

Nx Improve ventilation

Interventions

Occurs chronically in COPD patients

Respiratory Alkalosis

Definition pH >7.45 and PaCO₂ < 38mmHg

Clinical - Lightheadedness

Manifestations

- Decreased cerebral blood flow
- Tachycardia

Nx Treat underlying cause

Interventions

Types of inflammation

Acute Immediate, ~2 weeks, protective

Chronic Injurious agent not removed, last months or years

Subacute Active exudative phase (acute) and elements of repair (chronic)

Stages of Shock

1. Compensatory Stage

- BP normal
- Fight or flight
- Epi and Norepi released
- Blood to vital organs

Monitor tissue perfusion
Treat underlying disorder
Decrease anxiety
Promote safety

2. Progressive Stage

- Decrease BP

Detect early signs
Prevent complications
Promote rest and comfort
Support Family

3. Irreversible Stage

- Organ damage (liver and kidney)

Carry out prescribed treatment
Comfort and educate family

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Not published yet.

Last updated 12th April, 2017.

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