# FLUID VOLUME DEFICIT (FVD) Cheat Sheet

**FLUID VOLUME DEFICIT**

- Fluid intake is less than needed to meet body requirements
- The most common type is isotonic dehydration

**CONTRIBUTING FACTORS**

- Excess GI and/or renal loss
- Diaphoresis
- Fever
- Long term NPO status
- Hemorrhage
- Insufficient intake
- Burns
- Diuretic therapy
- Aging: older adults have less body water and decreased thirst sensation

**MANIFESTATIONS**

- Weight loss
- Dry mucous membranes
- Increased HR & respirations
- Tready pulse
- Capillary refill less than 3 sec
- Weakness, fatigue
- Orthostatic hypotension
- Poor skin turgor
- LATE SIGNS: oliguria, decreased central venous pressure (CVP), flattened neck veins

**DIAGNOSTIC PROCEDURES**

- Serum electrolytes, BUN, creatinine, Hct (can be high due to hemococoncentration)
- Urine: specific gravity and osmolarity

**MEDICATIONS**

- Electrolyte replacement
- Intravenous fluids

**NURSING INTERVENTIONS**

- Monitor vital signs, pulse quality & amplitude
- Monitor skin turgor. In older adults, check skin over sternum or forehead.
- Maintain strict I&O. Output should be at least 0.5 mL/kg/hr.
- Weight pt daily
- Monitor laboratory data
- Correct underlying cause
- Increase oral fluid intake. Initiate oral rehydration solution.
- Maintain IV fluids for severe dehydration as prescribed
- Monitor response to therapy
- Initiate fall precautions

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