

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

Thready 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 hemoconcentration)

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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