

### FLUID VOLUME EXCESS

Fluid intake or retention is greater than the body's needs

### CONTRIBUTING FACTORS

Kidney failure (late phase)

Heart failure

Cirrhosis

Interstitial to plasma fluid shifts (hypertonic fluids, burns)

Excessive water intake

Long term corticosteroid therapy

### MANIFESTATIONS

Cough, dyspnea, crackles

Increased BP

Tachypnea

Tachycardia

Bounding pulse

Weight gain (1 L water = 1 kg weight)

Jugular vein distention

Increased central venous pressure

Pitting edema

### DIAGNOSTIC PROCEDURES

Serum: Electrolytes, BUN, creatinine, Hct

Urine: specific gravity and osmolarity

Chest x-ray if respiratory complications present

### NURSING INTERVENTIONS

Monitor respiratory rate, symmetry, & effort

Monitor breath sounds for signs of pulmonary edema

Monitor for edema

Measure pitting edema on scale of 1+ (minimal) to 4+ (severe)

Monitor dependent edema by measuring circumference of extremities

Monitor for ascites

Measure abdominal girth

Weight pt daily

Maintain strict I&O

Monitor vital signs

Administer diuretics (osmotic, loop) as prescribed

Limit fluid intake

Maintain skin integrity

Use semi-Fowler's position

Reposition every 2 hr

Restrict sodium intake



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Published 4th January, 2019.  
Last updated 4th January, 2019.  
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