

ACTIVE LEARNING TEMPLATE: **System Disorder**

STUDENT NAME Stevie Lynn Bell

DISORDER/DISEASE PROCESS Menopause

REVIEW MODULE CHAPTER _____

Alterations in Health (Diagnosis)
 Also known as the "change of life"

Pathophysiology Related to Client Problem
 Is the cessation of menses for at least 12 months that occurs during 40-59 years of age. Menopause is the result of hormonal changes such as decrease in estrogen production.

Health Promotion and Disease Prevention

ASSESSMENT

Risk Factors

Expected Findings

- Hot flashes
- Atrophic vaginitis
- Shrinking of labia, dyspareunia, increased vaginal pH
- Incontinence
- Mood swings
- Changes in sleep pattern
- Joint pain
- Decreased bone density
- Decreased skin elasticity
- Loss of genital hair
- Migraine headaches
- Forgetfulness
- Breast tenderness

SAFETY CONSIDERATIONS

Laboratory Tests

- Hormones: Estrogen and Progesterone decreased; FSH increased.
- Cholesterol: LDL increased, HDL may decrease

Diagnostic Procedures

- Pelvic examination with Papanicolaou (Pap) test to rule out cancer in cases of abnormal bleeding.
- Endometrial Biopsy
- Bone mineral density measurement using dual energy x-ray absorptiometry (DEXA)

PATIENT-CENTERED CARE

Nursing Care

- Encourage physical activity for at least 30 mins/day 3-4 times/week.

Medications

- Estrogen
- Progesterone
- Progestin

Client Education

- Report vaginal bleeding
- Health Screenings
 - Mammograms
 - Colonoscopy
 - Gynecologic exam
 - ~~Blood testing~~
- Encourage smoking cessation

Complications

- Osteoporosis
- Embolic Complications
- Cancer

Therapeutic Procedures

- Vaginal instillations of estrogen
- Water soluble lubricant.

Interprofessional Care

- Gynecologist

STUDENT NAME Stevie Lynn BellMEDICATION EstrogenCATEGORY CLASS Hormone

REVIEW MODULE CHAPTER _____

PURPOSE OF MEDICATION**Expected Pharmacological Action**

Modulates pituitary secretion of gonadotropins; follicle stimulating hormone (FSH) and Lutenining hormone (LH)

Therapeutic Use

Treatment of moderate to severe vasomotor symptoms associated with menopause.

Complications

Frequent: Anorexia, nausea, swelling of breasts, peripheral edema marked by swollen ankles and feet. Transdermal: Skin Irritation, redness

Medication Administration**Menopause:**

PO: Adults, Elderly: 0.5-2mg/ day clinically (3 wks on, 1 wk off)

Osteoporosis Prophylaxis: PO
Adults, Elderly: 0.5mg/ day

Contraindications/Precautions

Contraindications: Hypersensitivity to estradiol, angioedema, hepatic dysfunction or disease, undiagnosed vaginal bleeding. Caution: Renal insufficiency, DM, endometriosis, hyperlipidemia, asthma, epilepsy, HTN,

Nursing Interventions

Monitor B/P, weight, serum calcium, glucose, LFT
Monitor for loss of vision, sudden onset of proptosis, diplopia, migraine and thrombembolic disorders

Interactions

CYP3A4 inducers may decrease concentration/effects.
CYP3A4 inhibitors may increase concentration/ effects.
Lab Values: May increase serum glucose, calcium, HDL, triglycerides. May decrease serum cholesterol, LDL, may effect metaoyrone testing, thyroid function tests.

Client Education

Limit Alcohol, caffeine
Avoid grapefruit products
Report abnormal vaginal bleeding
Immediately report sudden Headache, N/V, numbness Chest pain or visual disturbances

Evaluation of Medication Effectiveness

Monitor for a decrease in symptoms

STUDENT NAME Stevie Lynn BellCONCEPT Testicular Self Exam

REVIEW MODULE CHAPTER _____

Related Content(E.G., DELEGATION,
LEVELS OF PREVENTION,
ADVANCE DIRECTIVES)

- Perform the self exam during or after bath or shower.

Underlying Principles

- Hold the penis out of the way and examine each testicle separately.
- Gently roll each testicle by holding it with your thumbs and fingers of both hands.

Nursing Interventions

WHO? WHEN? WHY? HOW?

- Note any lumps or nodules (smooth round masses) or changes in the size, shape or consistency of your testicles.