

MARGARET H. ROLLINS SCHOOL OF NURSING
Nursing 102 – Nursing Care of Adults
Unit IV - Gastrointestinal System (1)
Class Prep

Part 1-Match the following GI terms to the correct definition.

- | | |
|--------------------------|--|
| 1. <u>C</u> Borborygmi | X Black tarry stool |
| 2. <u>A</u> Melena | X Fatty Stools |
| 3. <u>E</u> Pyrosis | X Loud, gurgling bowel sounds |
| 4. <u>B</u> Steatorrhea | X Bright red blood in the stool |
| 5. <u>D</u> Hematochezia | X Heartburn |
| 6. <u>F</u> GERD | X Reflux of stomach acid into esophagus |

Part 2-Complete and ATI Learning Template on Gastroesophageal Reflux Disease (GERD). Attach to the second page of this document or submit separately to the drop box.

ACTIVE LEARNING TEMPLATE: **System Disorder**

STUDENT NAME Diivya Creamer
 DISORDER/DISEASE PROCESS Gastroesophageal Reflux Disease (GERD) REVIEW MODULE CHAPTER _____

Alterations in Health (Diagnosis)
 GERD
 ↳ Chronic disease characterized by irritation + inflammation

Pathophysiology Related to Client Problem
 LES is incompetent and has ↓ pressure which leads to the reflux of gastric acid / contents into the esophagus → + gastric irritation.

Health Promotion and Disease Prevention
 - Smoking cessation
 - Small, frequent meals
 - Avoid eating 2 in 3hr of bedtime

ASSESSMENT

Risk Factors
 Hiatal hernia
 Obesity
 Pregnancy
 Smoking
 Activities that ↑ intra-abdominal pressure

Expected Findings
 Dyspepsia, pyrosis, hoarseness, sore throat, cough, wheezing
 Substernal burning
 Radiation pain (jaw, neck, back)
 Regurgitation, belching, flatulence, bloating, dysphagia, aspiration

Laboratory Tests
 pH monitoring
 Radionuclide studies ← →

Diagnostic Procedures
 H + P
 Upper GI endoscopy - Radionuclide study
 Bx
 Esophagram
 Motility (Manometry) study

SAFETY CONSIDERATIONS
 - Aspiration!!!
 - Long-term PPI's may ↑ R/F fractures → hip +/or spine
 ↳ May also ↑ R/F c. difficile infections
 - Long-term use of antacids may have S/E

PATIENT-CENTERED CARE

Nursing Care
 ↑ HOB
 Wt. loss strategies / diet modification
 Admin antacids 1-3hr after meals + @ bedtime

Medications
 Goal: ↓ volume + acidity of reflux
 ↳ Improve LES function
 ↳ ↑ esophageal clearance

Client Education
 - Avoid smoking
 - Modify diet (Wt. loss, no fatty foods)
 - Med adherence
 - Avoid ETOH
 - No tight fitting clothing

Therapeutic Procedures
 - Drug therapy
 - Endoscopic / surgical therapy
 Goal: Strengthen LES + enhance LES function

Antacids (ie. Tums)
 H2R blockers (ie. Pepcid)
 PPI's (ie. Protonix)

Interprofessional Care
 Gastroenterologist
 Nutritionist / dietitian
 GI surgeon
 PCP / HCP

Complications
 Esophagitis
 Esophageal stricture
 BE
 ↳ Precancerous condition
 Esophageal erosion
 Respiratory complications
 Dental erosion