

ACTIVE LEARNING TEMPLATE: *System Disorder*

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DISORDER/DISEASE PROCESS Diabetes Insipidus REVIEW MODULE CHAPTER _____

Alterations in Health Dx: condition characterized by polyuria, polydipsia, and inability to concentrate urine.

Pathophysiology Related to Client Problem: Occurs due to insufficient production of ADH or inability of the kidney to respond. Leads to excessive water loss, dehydration and hypernatremia

Health Promotion and Disease Prevention: Avoid medication that impair ADH function. Early diagnosis and treatment to prevent complications. Management of underlying conditions.

ASSESSMENT

Risk Factors: Head trauma, brain surgeries, genetic predisposition, kidney disease, lithium, demeclocycline.

Expected Findings: polyuria, polydipsia, dehydration, dry skin, fatigue, nocturia, confusion, electrolyte imbalance.

Laboratory Tests: Serum osmolality high and low, ADH levels, water deprivation test.

Diagnostic Procedures: MRI to assess hypothalamus, pituitary gland, water deprivation test, genetic testing for hereditary.

SAFETY CONSIDERATIONS: Monitor for dehydration, ensure fluids, education on symptoms of worsening dehydration or electrolyte imbalances.

PATIENT-CENTERED CARE

Nursing Care: Monitoring fluid balance, ensure adequate hydration, administer prescribed medications, education on managing symptoms.

Medications: desmopressin, thiazide diuretics,

Client Education: Maintain hydration, recognize symptoms, adherence to prescribed treatments, attending regular follow ups.

Complications: Severe dehydration electrolyte imbalances, seizures, coma.

Therapeutic Procedures: dietary modifications – low Na diet, addressing conditions like tumors or infections.

Interprofessional Care: endocrinologist, nephrologist, dietitians, nurses for care and education.

