

## Adult/Geriatric Critical Thinking Worksheet

**Student Name:** Natalie Martinez

**Unit:** S8

**Pt. Initials:**

**Date:** 3/30/2021

### 1. Disease Process & Brief Pathophysiology

Pleural effusion is the accumulation of fluid in between the parietal and visceral pleura, called the pleural cavity. The body produces pleural fluid in small amounts to lubricate the surfaces of the pleura. This is the thin tissue that lines the chest cavity and surrounds the lungs. Pleural effusion is an abnormal, excessive collection of this fluid. There are two types of pleural effusion: Transudative pleural effusion is caused by fluid leaking into the pleural space. This is from increased pressure in the blood vessels or a low blood protein count. Heart failure is the most common cause. Exudative effusion is caused by blocked blood vessels or lymph vessels, inflammation, infection, lung injury, and tumors.

Pleural effusion: Medlineplus medical encyclopedia. (n.d.). Retrieved March 31, 2021, from <https://medlineplus.gov/ency/article/000086.htm>

### 2. Factors for the Development of the Disease/Acute Illness

Congestive heart failure (P)  
Liver disease  
Kidney disease (P)  
Cancer  
Infections  
Autoimmune conditions  
Pulmonary embolism

### 3. Signs and Symptoms

Shortness of breath (P)  
Chest pain  
Fever  
Cough

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**4. Diagnostic Tests pertinent or confirming of diagnosis**

Chest X-ray (P)

Thoracentesis Vs (P)

Chest CTA (P)

CT scan

Ultrasound

**5. Lab Values that may be affected**

CBC - RBC (P), WBC

CMP - Fluid protein, Albumin (P), Creatinine (P), BUN, Glucose, Sodium, Potassium

**6. Current Treatment**

Thoracentesis Vs

Furosemide

**7. Focused Nursing Diagnosis:**

Excess fluid volume

**8. Related to (r/t):**

compromised regulatory mechanisms; heart & kidney failure

**9. As evidenced by (aeb):**

pleural effusion

Adopted: August 2016

**11. Nursing Interventions related to the Nursing Diagnosis in #7:**

1 .Elevate the head of the bed.

**Evidenced Based Practice:**

Head elevation helps improve the expansion of the lungs, enabling the patient to breathe more effectively.

2. Assist the patient to change positions as tolerated. Encourage the patient to lie on the affected side if possible.

**12. Patient Teaching:**

1. Educate patient on deep breathing exercises and relaxation techniques.

2. Teach and reinforce knowledge of medications.

3. Teach about signs and symptoms of both excess and deficient fluid volume.

**13. Discharge Planning/Community Resources:**

1. Meals on wheels

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**Evidenced Based Practice:**

Non-painful sensations such as putting pressure by lying on the affected side can reduce pain perception.

2. Refer to a home health care to assist in activities of daily living

3. National directory of home modification and repair resources

**10. Desired patient outcome:**

Patient will describe symptoms that indicate the need to consult with health care provider by 3/30/2021.

3. Administer prescribed diuretics as appropriate

**Evidenced Based Practice:**

To excrete excess fluid

Ackley, B. J., Ladwig, G. B., Flynn, M. M., Martinez-Kratz, M. R., & Zanotti, M. (2020). Nursing diagnosis handbook: An evidence-based guide to planning care. In Nursing diagnosis handbook: An evidence-based guide to planning care (pp. 412-416). St. Louis, MO: Elsevier.