Concept/System examples	Compensatory	Patient Assessment	Nursing Interventions	Late consequences
Acid-Base Balance Is it acidosis or alkalosis? Is it respiratory or metabolic?	PH <7.35 or > 7.45 PaO2 <80 mmHg PaCO2 <35 or > 45 mmHg HCO3 <22 or > 26 mEq/L SaO2 < 95%	Tachy/brady cardia Tachy/brady pnea Nausea/vomiting Diarrhea Confusion	Assess the patient Notify charge nurse, PCP, and/or rapid response Prepare for new lab work, IV site, medication administration	Dysrhythmias Seizures Tetany Coma/Death
Clotting Examples: Blood products, DVT, DIC, HITT, ITP	Thrombocytopenia Thrombosis Decreased Platelets Elevated D-Dimer Decreased Fibrinogen	Bleeding – oozing at IV site Multiple areas of bruising Clotting and decreased perfusion SOB Chest pain	Assess the patient Notify charge nurse, PCP Prepare for O2, IV site, lab work, fall precautions, possible blood product transfusion	Venous thrombosis Pulmonary Embolism Arterial Vascular Infarct Stroke (hemorrhagic/ischemic) Ischemic phalanges Petechiae Seizures/Coma/Death
Fluid & Electrolyte Balance Examples: Hyper/Hypo minerals	Hyper/Hyponatremia Hyper/Hypokalemia Hyper/Hypomagnesemia Hyper/Hypocalcemia	Confused Fatigue, sleepy, dizzy Weakness, spasms, cramps Dysrhythmias	Assess the patient Notify charge nurse, PCP Prepare for O2, IV site, medication administration	Lethal dysrhythmia Prepare for CPR Seizures/Coma/Death
Gas Exchange/ oxygenation Examples: Respiratory; ARDS, Anemia, Cystic Fibrosis	PaO2 <80 mmHg PaCO2 <35 or > 45 mmHg SaO2 < 95% Tachy (cardia/pnea)	RR increased HR increased Hyperventilating – blowing off CO2 Hypoventilation – retaining CO2 = headache	Assess the patient Notify charge nurse, PCP Prepare for O2, O2 sats, IV site, medication administration	Brady (cardia/pnea) Cyanosis PaO2 < 45 mmHg Lethargic, unresponsive Mechanical ventilation Respiratory arrest/Death
Immunity Examples: Anaphylaxis, Infections, MODS, SIRS, Sepsis, Trauma, MS, RA, Lupus, Vaccines	Imbalance of supply/demand of O2 and nutrients Impaired cellular metabolism	Inflammatory response: vasodilation/constriction Tachycardia Tachypnea Hyperthermia Leukocytosis Confusion	Assess the patient Notify charge nurse, PCP Prepare for O2, O2 sats, IV site, medication administration	Lethargy Bradycardia Bradypnea Leukopenia Hypothermic Fluid shift -Hypotension Cardiopulmonary arrest/Death
Intracranial Regulation Examples: Neuro; Seizures, brain injury, stroke, meningitis	Perfusion issues (stroke, ICP) Neurologic transmission (SZ, Epilepsy) Pathologic issues – (neoplasm, degenerative (Alzheimer's), inflammation (meningitis)	Confusion Extremity weakness Slurred speech Swallowing issues Sensitivity to light Hyperthermia Nausea/vomiting Headache	Assess the patient Notify charge nurse, PCP Prepare for O2, O2 sats, IV site, medication administration Glasgow Coma Scale Raise HOB 30° & Head in neutral position Prepare for intubation NPO	Posturing Lethargic, unresponsive Vomiting with no nausea Ipsilateral pupils Brain herniation Brain death Death
Metabolism Examples: Endocrine (Diabetes, Thyroid), Cushing's, Addison's, Hepatic failure	Hyper/Hypo glycemia Hyper/Hypo thyroid Hyper/Hypo cortisol Hyper/Hypo ALT/AST	Polyuria/Polydipsia Hot & Dry / Cold & Clammy Confused Weight loss/gain Bleeding issues Skin tone changes (grey/green)	Assess the patient Closely follow I/O Prepare to give meds, IV site Notify charge nurse or PCP for any changes in assessment	Ketoacidosis Ascites/Jaundice Neurological changes Weakened immune system Hypotension Tachy/Brady cardia

Concept/System examples	Compensatory	Patient Assessment	Nursing Interventions	Late consequences	
Mobility Examples: Fractures, spinal cord injury, joint replacement, clubfoot, hip dysplasia, gout, RA, osteoporosis	Skeletal or neuromuscular dysfunction	Alternative devices (cane, cast, wheelchair) Gait impaired Pain SOB Perfusion issues Bradycardia Paralysis Emotional status changes	Assess the patient Prepare IV site, O2, give medications Implement fall precautions Notify charge nurse or PCP for any changes in assessment	Loss of limb due to ischemia Fat embolism Respiratory arrest Pressure ulcers Sepsis Shock Death	
Nutrition Examples: obesity, malnutrition, iron deficiency, DM2, Pancreatitis, Cirrhosis, dysphagia	Insufficient or excess nutrition	Poor skin condition Possible s/s infection, aspiration, wounds Pain Muscle weakness/fatigue Hypoalbuminemia	Assess the patient Monitor I/O closely Assess for s/s infection Need to start enteral feeding ASAP Prepare for IV site, lab work, diagnostics (xrays, CT/MRI) Notify charge nurse or PCP for any changes in assessment	Rhabdomyolysis Muscle mass deterioration/wasting Uncontrolled weight loss Bradycardia Confusion Hypo/Hyper glycemia Emotional status changes	
Perfusion Examples: Cardiovascular (PAD, CAD, CHF, MI); HTN, dysrhythmias, shock, Sepsis, MODS, Traumas (Burns, Obstructions, Skeletal injuries), DIC, PE	Tachy (cardia/pnea) Cap refills decreased Hypotension Urine Output decreased (<0.5 mL/kg/hour)	Confusion Restlessness Apprehension Pale Extremities (cool/warm variable) Pulses (variable) Pain (variable)	Fluid resuscitation (per orders) Monitor I/O Monitor Vitals, Sa02 Provide O2 (per orders) Peripheral Neuro Assess	Brady (cardia/pnea) Moist lung sounds Lethargic Unresponsive Decreased peripheral perfusion Severe hypotension Hypothermia Cold and Clammy Severe acidosis	
Thermoregulation Examples: Hyper/Hypothermia	Hypothermia: Brain trauma/injury, environmental exposure Hyperthermia: Brain trauma/injury, environmental exposure, hyperthyroidism, infection, heat exhaustion/stroke	Tachy (cardia/pnea) (hyper) Brady (cardia/pnea) (hypo)	Monitor Vitals Assess hydration status Monitor I/O Monitor for dysrhythmias Evaluate fluid/electros Heat or Cool patient Monitor LOC Assess skin temps	Hyperthermia: Nausea/vomiting Confused Flushing Dry/dehydrated Monitor for seizures	Hypothermia: Lethargic Bradycardic/dysrhythmias Pale or cyanotic Monitor for seizures
Tissue Integrity Examples: wounds (surgical, medical, traumatic)	Open/Bleeding/Pain Dry/Flaky Changes in skin temp Perfusion issues Edema	Depends on location Red/Pale/Purple Regular or irregular borders Pain Drainage, small	Document appearance (written or pics) Assess skin everywhere (turgor, color, dryness, lesions) Braden Scale Nutritional status Monitor drainage	Loss of tissue or limb Infection Drainage increase Size increase	