

CASE STUDY:

Frannie Failure, a patient on 4P, calls the nurse and states, "I feel really puffy. My rings feel so tight on my fingers and I am having trouble catching my breath." The patient is lying flat in the bed and is alert and oriented x 3. Normal saline 0.9% @ 125mL/HR is running.

Assessment:

- Vital Signs: T 97.9 oral, HR 120, RR 24, SpO2 86% RA, BP 152/94, pain 0/10.
- Respiratory: Lung sounds- crackles throughout bilaterally, non-productive cough.
- Cardiac: Heart sounds- S3, pedal pulses not palpable, 3+ pitting edema bilateral feet and ankles.
- Skin intact, pale and cool.
- Gastrointestinal: Bowel sounds x4 WNL, BM yesterday morning.
- Intake/Output: Patient has had 900ml in and 200ml out over the last 8 hours.

- 1. What additional information would you want/need to know?**
 - a. WT changes >2 lbs in a day
 - b. Sodium Level/Intake
 - c. Medications Taken
 - d. Hand Pallor from ring tightness
- 2. What assessment/ interventions would be appropriate for this patient?**
 - a. Assess Lung and Heart Sounds
 - b. Assess edema
 - c. Assess I/O
 - d. Assess ABG's
 - e. Sit patient upright instead of flat
 - f. Slow/stop IV fluids
 - g. PRN O2
- 3. What would you anticipate the healthcare provider to order?**
 - a. Lasix
 - b. Oxygen PRN
 - c. Fluid restriction
 - d. Sodium restriction
 - e. EKG
 - f. CXR
 - g. Labs

4. What medications would be appropriate for this patient (include all pertinent from the Pharmacology List) ? Doses? Nursing Interventions? You will pick three of these medications to complete the ATI Medication Templates.
- a. Furosemide
 - i. PO 20-80 mg/day
 - ii. Assess fluid status
 - iii. Assess for allergies
 - iv. Monitor electrolytes
 - b. Lisinopril
 - i. 10mg ONCE Daily
 - ii. Limit salt intake
 - iii. Change positions slowly
 - iv. Rx may cause hypoglycemia
 - c. Metoprolol
 - i. 25-100 mg/Day
 - ii. Change positions slowly
 - iii. Monitor BP/EKG
 - iv. Monitor I/O
 - v. Monitor Labs
5. What patient education would you include?
- a. Daily WT
 - b. Low sodium diet and why it is important
 - c. S/S of worsening HF
 - d. When to contact HCP or come back into ER