

Date & Initials: 2/14/19 AT

Nursing Diagnosis:

Impaired gas exchange related to: Acute Hypoxemic Respiratory Failure

AEB:

- SOB
- Productive moist cough
- SpO2 82% NC 2 liters
- Coarse Crackles on expiration
- ABG'S: PaCO2 56.9
PaO2 52.5
HCO3 33.3
- RBC 3.56
- HGB 9.0
- Somnolence
- Pallor, dusky skin
- Diaphoresis

Patient outcomes:

Patient will display impaired gas exchange.

AEB:

- Denies SOB
- Denies productive cough
- SP02 <93% on RA
- Clear Lung sounds
- ABG'S: PacO2 35-45mmHg
PaO2 80-100mmHg
HC03 22-28 mEq/L
- RBC 3.6-5.0
- HGB 11.8-15.4
- Able to stay awake
- Normal skin color
- No diaphoresis

By discharge

Related Interventions:

-Assess respiratory status: Lung sounds, RR, Depth of use of accessory muscles, area of pallor/dusky skin Q2H (0800,1000,1200,etc.)

Rational: To determine gas exchange.

-Assess vital signs Q4H (0800,1200,1600, etc)

Rational: Monitor to determine patient's status.

-Assess level of consciousness and mentation changes Q2H (0800,1000,1200, etc)

Rational: *"A decrease level of consciousness can be an indirect measurement of impaired oxygenation, but also impairs one's ability to protect the airway, potentially further adversely affecting oxygenation"* (Doenges,2016).

-Assess patient's pain level Q4H (0800,1200,1600, etc)

Rational: *To keep patient comfortable, pain can affect respiratory status.*

-Assess Laboratory data CBC daily (0900)

Rational: *To assess improvement of RBC, HGB*

-Evaluate pulse ox, ABG'S and lung assessment Q2H (0800,1000,1200, etc)

Rational: *To determine oxygenation and levels of CO2 retention.*

-Elevate HOB 45-90 degrees and position changes Q2H (0800,1000,1200, etc)

Rational: *To promote lung expansion and increased oxygenation, mobilize secretions, produce cough.*

-Provide Oxygen 2-4 liters for >93% spo2 (PRN,0800,1000,1200)

Rational: **Increase oxygenation tissues**

-Maintain adequate input/output Q4H (0800, 1200, etc)

Rational: *To avoid fluid overload*

-Administer Bronchodilators as ordered. (PRN Q4H)

Rational: *To Promote adequate oxygen.*

-Encourage adequate rest, promote a calm, restful environment (PRN)

Rational: *This helps limit oxygen needs and consumption.*

-Discuss home oxygen therapy & safety measures as indicated (0800,1200,1600,and at discharge)

Rational: *To ensure patient's safety.*

(Doenges, M. E., Moorhouse, M.F., & Murr,A.C.2016)

Evaluation: Goal NOT met.

AEB:

-SOB

-Productive moist cough

-SP02 100% NC 4 liters

-coarse with no crackles on expiration.

- ABG'S PacO2 56.9
PaO2 52.5
HC03 33.3
- RBC 3.52
- HGB 9.0
- Somnolence
- Pallor, Dusky skin
- Diaphoresis

Continue plan of care
A.Toole FRMCSN

References:

Doenges, M.E., Moorhouse, M. F., & Murr, A. C. (2016). *Nurses' pocket guide Diagnoses, Prioritized interventions, and rationals (14thed)*. F. A. Davis Company: Unbound Mobile Platform