Nursing Diagnosis and Outcomes

Subjective Data

Impaired gas exchange related to COPD as evidence by abnormal ABG values, hypercapnia, and hypoxia
Patient will maintain clear lung field and remain free of signs of respiratory distress
Patient will participate in therapeutic interventions to optimize oxygenation within the limits of capability/condition
Decreased cardiac output related to systolic and diastolic congestive heart failure and atrial fibrillation as evidence by elevated BNP
Patient will demonstrate adequate cardiac output as evidence by blood pressure and pulse within normal parameters
Patient will exhibit warm, dry skin, eupnea with absence of pulmonary crackles
Risk for impaired skin integrity related to pressure and friction as evidence by immobility, activity intolerance, and high Braden scale score
Patient will report any altered sensation or pain on skin
Patient will work with physical rehabilitation to gain some mobility

Patient came into the emergency department with complaints of shortness of breath

She stated that she was very confused and thought somebody was kidnapping her,"

She couldn't remember where she was and felt "

Medical Interventions and Nursing Interventions

Objective Data
Patient Information

M- administer 4 L of O2 per providers orders
M- continue with BiPap and wean as the patient tolerates
N- position the patient with the head of bed elevated in a semi-Fowler's position as tolerated
N- help patient to deep breathe and perform controlled coughing; encourage slow, deep breathing
M- admit patient to telemetry
M- take Lasix as prescribed per providers orders
N- record input/output and closely monitor fluid intake
M- closely monitor for symptoms of decreased cardiac output, including diminished quality of peripheral pulses, cold and clammy skin and extremities, elevated respirations and heart rate, neck vein distention, and decreased level of consciousness
M- Discharge for physical rehabilitation to regain mobility
M- Educate on prevention of deep vein thrombosis, the use of compression stockings, and weight loss
N- Turn the patient every two hours per providers orders
Use pillows or foam wedges to keep bony prominences from direct contact with each other

-recently discharge one week prior for congestive heart failure and chronic respiratory failure
-on BiPap
-irregular rhythm of heart with controlled heart rate
-use of accessory muscles when breathing
-edema of lower extremities bilaterally
-edema of abdominal wall
-alert and oriented x3, but very fatigued
-on 4 L of oxygen nasal canula, is short of breath without oxygen on
-elevated CO2 and BNP
-fall score of 75, high risk
-12 Braden score
-vitals @ 0750, 96.9 F, 82 HR, 20 respirations, 99 % O2, 107/76, no pain
-vitals @ 1101, 97.5 F, 81 HR, 20 respirations, 98% O2, 115/65, no pain
-complete immobility activity intolerance

77-year-old Caucasian female
5'4" 349 lbs
Full code
Allergies to buspirone, lisinopril, iodinated diagnostic agents
Married
Retired
Chronic respiratory failure with hypoxia and hypercapnia, atrial fibrillation, severe obesity with serious comorbidities, diastolic and systolic congestive heart failure, COPD, hyperlipidemia, hypertension