

### Subjective

Weakness & nausea  
Rest did not help alleviate symptoms  
Walking initiated and worsened the feeling of weakness.  
Has not tried any forms of treatment to increase heart rate, alleviate weakness, or control nausea

### Objective

Heart rate remaining in the low 40's and 30's.  
Elevated troponin level  
ECG showing a complete heart block  
X-ray shows no abnormalities for additional/other diagnosis'

VD is a 86-year-old male with a history of CAD, HTN. CKD, DM type 2, GI bleed, hyperlipidemia, and heart failure. No secondary diagnosis. Pertinent past surgical history includes a cardiac catheterization, appendectomy, and an aortic valve replacement. Family history includes his father that had a stroke and cardiovascular disease.

### Nursing Diagnosis/Outcomes

Ineffective tissue perfusion related to a complete heart block evidenced by decreased heart rate.  
Patient will be free of dysrhythmias with an adequate cardiac output to perfuse all body organs.  
Risk for infection related to pacemaker & indwelling catheter implantation evidenced by both insertion sites.  
Patient will exhibit no signs of infection after insertion at site of catheter or pacemaker site.  
Impaired physical mobility related to activity restriction as evidenced by bedrest activity order by the physician.  
Patient will comply to his bedrest activity order until approved by his physician following placement of his pacemaker.  
Impaired skin integrity related to insertion of pacemaker and placement of an indwelling catheter evidenced by insertion site and insertion of a catheter.  
Patient will have healed wound or insertion sites without signs or symptoms of infection. Patient will remain free from pressure sores.

### Nursing Interventions

Titration of dopamine drip if heart rate falls below 30.  
Monitor vital signs: Pulse oximetry, blood pressure, heart rate, and respiration rate every hour  
Monitor urine output  
Instruct patient to perform deep breathing and active range of motion.  
Monitor blood glucose levels prior to meals.  
Maintain NPO status.  
Monitor CBC and CMP.  
Instruct patient to turn or change positions every 2 hours.  
Monitor ECG hourly.  
Educate on diagnosis and care post-op.  
Speak in a calm, therapeutic manner  
Establish honest, therapeutic communication in an empathetic manner  
Explain all interventions, diagnostics and medications