Subjective data	Nursing diagnosis/outcomes
"Shortness of breath" and "cough" as chief complaint	- Ineffective breathing pattern Related to ineffective inspiration and expiration occurring with chronic airflow limitations as evidence by COPD exacerbation
- Patients states that his activity level decreased due to his worsening shortness of breath	Outcome: Following treatment and intervention, the patient's breathing pattern improves as evidence by a report of Reduction/absence of SOB
- rest periods and PRN supplemental oxygen of 2L	- Impaired gas exchange Related to DX
- not a smoker	Outcome: This diagnostic goal's outcome is to assess for hypoxia and keep patient's O_2 levels above 92%
Objective data	- Activity Intolerance
- wheezes and diminished breath sounds present anteriorly and posteriorly	Outcome: Upon discharge, the patient can Report a decrease in his Report of dyspnea during activity
- O_2 therapy 2L/min via NC	- Imbalanced Nutrition: less than body Requirements
- decrease in Na and K	
- Increase in Creatinine levels	Outcome: The patient Responded well to diet and fluid intake education
- ABGs showed Respiratory acidosis	
- Patient was not febrile during my shift	**Nursing Interventions**
Patient Information	- assess respiratory status Q2-4h
K.K. is a 72-year-old African American male with a history of hypertension, atrial fibrillation, hyperlipidemia and COPD. His past surgical history includes an appendectomy in 1995. Patient does not smoke tobacco products	- Admin. bronchodilator therapy
	- Assess s/s of hypoxia
	- monitor O_2 pulse oximetry
	- Monitor the patient's Respiratory Response to activity
	- Allow 90 minute Rest periods
	- Assess food/fluid intake
	- Discuss w/ patient the importance of good nutrition in treatment of COPD.