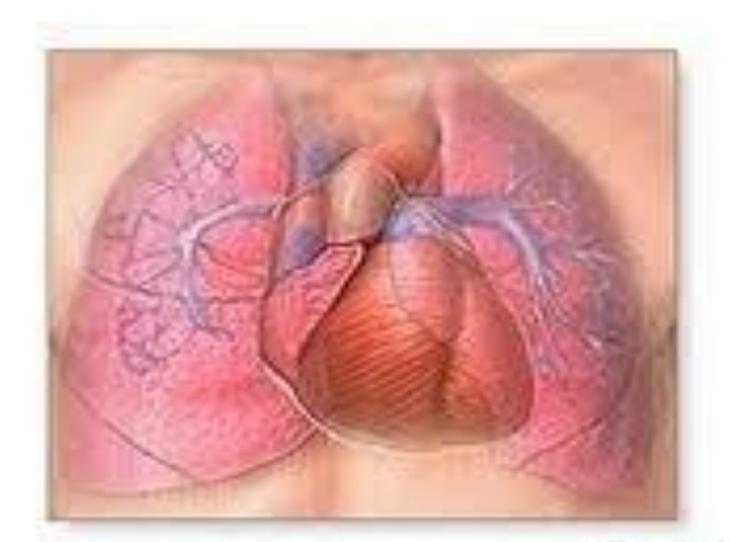
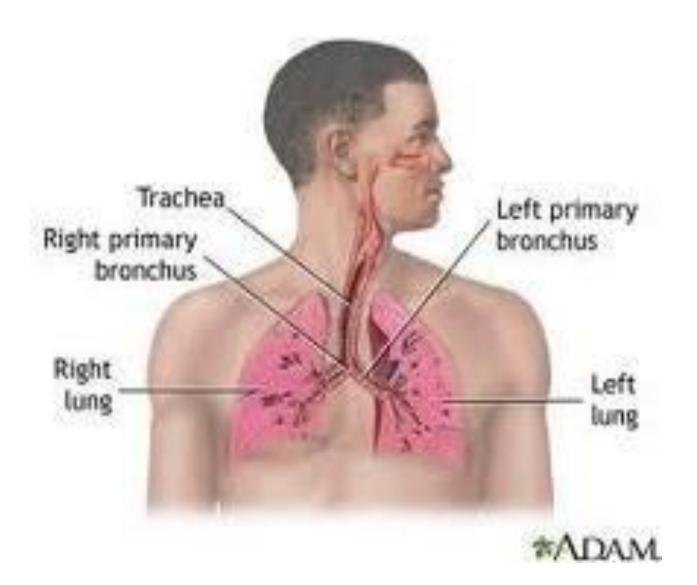
# CORPULMONALE





#### DEFINITION OF COR PULMONALE

• COR PULMONALE IS THE FAILURE OF THE RIGHT SIDE HEART
CAUSED BY PROLONGED HIGH BLOOD PRESSURE IN THE
PULMONARY ARTERY AND RIGHT VENTRICLE OF THE HEART.IT IS
ALSO CALLED RIGHT SIDE HEART FAILURE.

Cor pulmonale, or right-sided heart failure, is an enlargement of the right ventricle due to high blood pressure in the arteries of the lungs usually caused by chronic lung disease Distator (stretching) Hypertrophy (overgrowth of cells)

## **KYPHOSCOLIOSIS**



#### CLINICAL FEATURES OF CORPULMONALE

- CHEST DISCOMFORTE
- RETROSTERNAL OR SUBSTERNEL PAIN
- DYSPNOEA
- WHEEZING RESPIRATION
- CHRONIC PRODUCTIVE COUGH
- FATIGUE
- WEIGHT GAIN

- DISTENDED NECK VEIN
- BLUISH COLOUR TO THE SKIN
- SWELLING OF THE FEET OR ANKLES
- ASCITIS
- ABNORMAL HEART SOUND

### DIAGNOSIC EVALUATION

- HISTOY COLLECTION
- PHYSICAL EXAMINATION
- CHEST X RAY

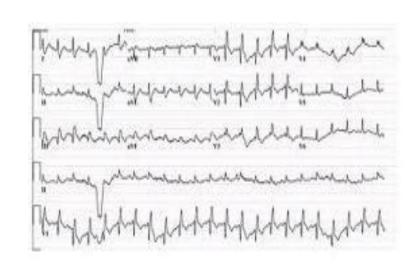


• ELECTROCARDIOGRAM(ECG

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PULMONARY FUNCTION

**TEST** 



#### **ECHOCARDIOGRAM**



• MEASURMENT OF ABG

• CT SCAN OF THE CHEST

### SURGICAL MANAGEMENT

• LUNG TRANSPLANTATION

#### NURSING INTERVENTIONS

- BREATH AND AIRWAY OBSTRUCTION
- > ASSESS THE CONDITION OF THE PATIENT
- >ASSIST THE CLIENT IN HIGH FOWLERS POSITION
- ➤ ADMINISTER LOW —FLOW OXYGEN THERAPY
- >ADMINISTER BRONCHODILATORS IF ORDERD
- ➤ PROVIDE NEBULIZATION
- ➤ PROVIDE GOOD VENTILATION IN TO THE ROOM

- INEFFECTIVE AIRWAY CLEARANCE RELATED TO INCREASED MUCOUS
   PRODUCTION AND INEFFECTIVE COUGH
- > MONITOR VITAL SIGNS
- ➤ MONITOR LUNG SOUND EVERY 4-8HOURS AND BEFORE AND AFTER COUGHING EPISODES
- ► PROVIDE STEAM INHALATION , NEBULIZATION
- ➤ PROVIDE CHEST PHYSICAL THERAPY, IF NEEDED
- ➤ GIVE ORAL CARE TO REMOVE SECRETIONS IN MOUTH

- IMPAIRED GAS EXCHANGE RELATED TO EXCESS FLUID IN LUNGS ,INCREASED PULMONARY VASCULAR RESISTANCE
- MONITORING ABG VALUES AND OXYGEN SATURATION
- ► ADMINISTER CONTINUOUS LOW-FLOW OXYGEN AS CORRECT TO HYPOXIA
- >ASSIST THE PATIENT IN TO HIGH FOWLERS POSITION
- >ADMINISTER BRONCHODILATORS FOR RELAX BRONCHIAL SMOOTH MUSCLE
- ➤ AVOID OPIOIDS, SEDATIVES BECAUSE THESE MEDICATIONS ARE RESPIRATORY

  DEPRESENTS AND CAN FURTHER IMPAIR VENTILATION

- EXCESS FLUID VOLUME RELATED TO RIGHT SIDE HEART FAILURE
- ► WATCH ALTERATIONS IN ELECTROLYTE LEVELS ESPECIALLY

  POTTASSIUM ,WHICH CAN BE LEAD TO DISTURBANCE OF CARDIAC

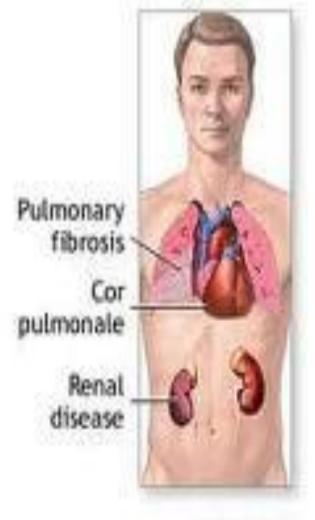
  RHYTHM
- > MONITOR ECG
- ➤ RESTRICT SODIUM INTAKE BASED ON FLUIDD RETENTION
- >LIMIT PHYSICAL ACTIVITY

- IMBALANCED NUTRITION LESS THAN BODY REQUIRMENT RELATED TO COUGH, DYSPNOEA
- >ASSIST THE PATIENT WITH MOUTH CARE BEFORE MEALS AND AS NEEDED
- > PROVIDE SMALL FREQUENT MEALS WITH HIGH PROTIEN AND CALORIES
- ➤ ADVISE THE PATIENT TO AVOID GAS FORMING FOOD SUCH AS POTTATO ,CABBAGE ETC
- ADIVISE HYPOXEMIC PATIENT TO USE OXYGEN VIAL NASAL CANULA DURING MEALS
- ➤ MONITOR THE CLIENTS FOOD INTAKE AND WEIGHT

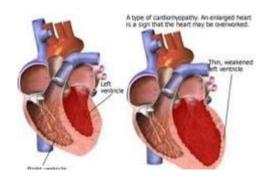




High numbers of RBCs may indicate conditions such as:







#### **ASSIGNMENT**

• Mr X 50 YEARS AGE MAN ADMITTED IN MICU WITH THE C/O CHEST DISCOMFORT, DYSPNEA, PERIPHERAL EDEMA AND DISTENDED NECK VEIN. HE IS HAVING THE H/O COPD SINCE 5 YEARS. NOW THE DOCTOR DIAGNOSED AS RIGHT SIDE HEART FAILURE.

PREPARE A NURSING CARE PLAN FOR HIM.

## THANK YOU