

Heart Failure



The nurse is caring for Peter Thompson, a 52-year-old male client with shortness of breath.

Review the medical record, then answer the following questions:

1. Which assessment findings do you notice that require immediate follow-up? What does this clinical data mean?

Concerning PRESENT PROBLEM Findings	Meaning/Interpretation
Concerning VITAL SIGN Findings	Meaning/Interpretation
Concerning NURSE ASSESSMENT Findings	Meaning/Interpretation
Concerning DIAGNOSTIC Findings	Meaning/Interpretation

2. After interpreting the meaning of clinical data, what problems are possible? Which problem is the priority? State the pathophysiology of the primary problem in your *own* words.

Possible Problems	Priority Problem	Pathophysiology of Priority Problem

3. After identifying the priority problem, the nurse would anticipate which orders. For each order, state the rationale and expected outcome.

Anticipated Orders	Rationale	Expected Outcome

4. After identifying the current problem, what is the nursing priority? List three priority nursing interventions. For each intervention, state the rationale and expected outcome.

Nursing Priority		
Priority Intervention(s)	Rationale	Expected Outcome

The nurse has implemented all medical orders and the nursing plan of care.
Two hours later, the following assessment data is collected:

5. For each finding, make a clinical judgment by placing an "x" in the appropriate column if the patient's condition has improved, has not changed, or has declined.

Assessment Finding	Improved	No Change	Declined
T: 98.4 F/36.9 C (oral)			
P: 88 (regular)			
R: 22 (regular)			
BP: 112/50 MAP: 71			
O2 sat: 90% (12 liters high flow n/c)			
Coarse crackles scattered throughout both lung			
labored respiratory effort			
30 mL of urine output since furosemide 40 mg IV administered			
4+ edema			
jugular vein distention			

6. Is the *overall* status of the client:

Current Status	Rationale
a. Improved b. No change c. Declined	

7. After evaluating the client, identify the current nursing priority and which action(s) the nurse should take. List interventions by priority and the expected outcome.

Nursing Priority		
Priority Interventions	Rationale	Expected Outcome

Nurse Reflection

8. To strengthen your clinical judgment skills, reflect on your knowledge and the decisions made caring for this patient by answering the reflection questions below.

Reflection Question	Nurse Reflection
What did you learn?	
What content/concepts do you need to understand to make better judgments?	
How will you apply what was learned to improve patient care?	