ENDOCARDITIS PATHO CHART

PATHOPHYSIOLOGY

Inflammation of the inner lining of heart and/or valves. Vegetations can form, which can become embolic. Typically caused by IV drug use or valve replacement. Causitive infective agent can enter via oral cavity (like from a dental procedure), from an invasive procedure, or result from a general infection.

ASSESSMENT FINDINGS

• Spiking fever, heart murmur, signs of heart failure, elevated WBC, clubbing of fingers, splinter hemorrhages in nailbeds, Janeway lesions on fingers, toes, nose







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DIAGNOSTICS

- Chest x-ray
- ECG
- Echocardiogram
- Stress Test
- Angiography

NURSING PRIORITIES

- Promote optimal cardiac output
- Optimize activity tolerance
- Promote sufficient gas exchange

THERAPEUTIC MANAGEMENT

- Antiembolic stockings
- IV antibiotic therapy
- Teach client to monitor for signs of infection
- Oral hygiene with soft bristled tooth brush twice a day and rinse
- Monitor for signs of emboli
- Instruct dental provider of condition (prophylactic antibiotics needed)

MEDICATION THERAPY

- Diuretics
- Beta blockers
- CCB

- ACE inhbitiors
- Inotropic agents
- Anticoagulants

