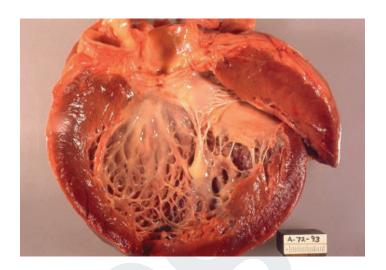
# **CARDIOMYOPATHY PATHO CHART**

### **PATHOPHYSIOLOGY**

Abnormality of heart muscle leading to functional changes. Three types - Dilated means that all 4 chambers enlarged, contractility, CO; Hypertrophic means that it is a progressive thickening of ventricular muscle, CO; Restrictive results in rigid ventricular walls do not stretch during filling, which leads to right HF, SV, CO

### **ASSESSMENT FINDINGS**

• Fatigue, weakness, dysrhythmias, additional heart sounds (S3, S4), heart failure s/s, cardiomegaly



### **DIAGNOSTICS**

- BNP
- Chest x-ray
- ECG

- Hemodynamics
  - CVP, cardiac output, stroke volume
- Ultrasound
  - Ejection fraction less than 40% is concerning

## **NURSING PRIORITIES**

- Promote optimal cardiac output
- Optimize activity tolerance
- Promote sufficient gas exchange
- THERAPEUTIC MANAGEMENT
- Monitor for developing signs and symptoms of heart failure
- Encourage rest
- Decrease stress
- Daily weights

- Monitor and correct electrolytes
- Closely monitor I&O
- Assess level of SOB upon exertion

### **MEDICATION THERAPY**

- Diuretics
- Electrolyte replacement
- Anticoagulants (increased risk for atrial fibrillation and clot formation)
- Inotropic agents
- ACE inhibitors
- Vasodilators

