

HIATAL HERNIA

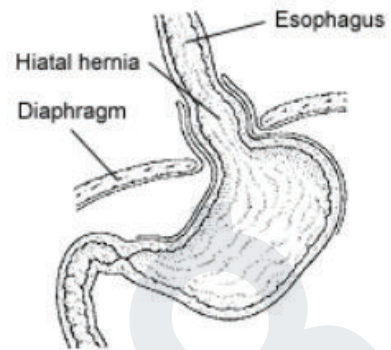
PATHOPHYSIOLOGY

Protrusion of stomach through the diaphragm into the chest cavity. This is caused by weakening of the muscles in the diaphragm. Can be concerning for strangulation of the stomach.

ASSESSMENT FINDINGS

Heartburn, regurgitation, dysphagia, fullness, peristalsis sounds over chest, chest pain, abdominal pain.

Hiatal Hernia



DIAGNOSTICS

- X-ray
- Endoscopy
- pH testing of the esophagus.

NURSING PRIORITIES

- Promote optimal gastrointestinal perfusion
- Promote optimal gastrointestinal function
- Promote safety with swallowing

THERAPEUTIC MANAGEMENT

- Have the patient stay upright for an hour after eating
- Have the patient eat small frequent meals
- Avoid medications that delay gastric emptying
- Avoid straining or vigorous exercise
- Have the patient sleep with the HOB elevated.

MEDICATION THERAPY

- Proton Pump Inhibitors such as omeprazole or lansoprazole
- H2 blockers such as ranitidine or famotidine.