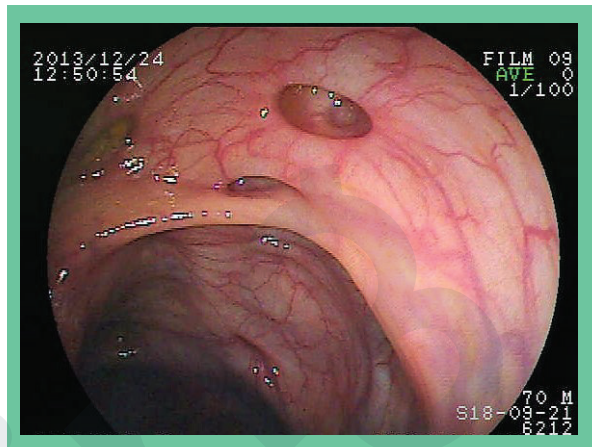


DIVERTICULITIS PATHOCHART

PATHOPHYSIOLOGY

Diverticulosis is a benign condition where pouches form along the intestine wall. These pouches may form anywhere along the intestine, but are most commonly found at the end of the descending and sigmoid colons. Diverticulitis involves small abscesses or infection in one or more of the diverticula, caused by bacteria collecting in the pouches. This can cause bleeding and a risk of perforation of the bowel. Evidence suggests a low-fiber diet can contribute to development of diverticulosis.



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<https://commons.wikimedia.org/w/index.php?curid=62875735>

ASSESSMENT FINDINGS

- Severe abdominal pain / cramping in LLQ
- Abdominal bloating
- Nausea / vomiting
- Constipation
- Fever / chills
- Leukocytosis
- Guarding of abdomen
- Possible bloody stools

DIAGNOSTICS

- Colonoscopy
- Occult blood stool test

NURSING PRIORITIES

- Promote optimal nutrition
- Promote comfort
- Assess/Manage Bleeding

THERAPEUTIC MANAGEMENT

- Bowel rest during acute exacerbation
- Increase fluid intake >3L if not contraindicated
- Probiotics to regulate intestinal bacteria

MEDICATION THERAPY

- Antibiotics
- Analgesics
- Bulk-Forming Laxatives