

(EMPHYSEMA) NURSING CARE PLAN

Medical Diagnosis: Emphysema

Subjective Data:	Nursing Intervention (ADPIE)	Rationale
<ul style="list-style-type: none"> • Chronic cough • Difficulty breathing • Notice avoiding certain activities • Chest tightness/pain 	Auscultate lung sounds	If wheezy they may need a breathing treatment If you hear crackles they may have pneumonia and potentially could use suctioning.
	Monitor ABGs	Blood gases help to determine if the patient is in respiratory acidosis.
	Encourage a healthy weight Early stages of emphysema: overweight Late stages of emphysema: underweight	Having excess weight on the patient decreases the space for the lungs to expand. In later stages of emphysema, the patient can be very thin (barrel-chested) and it is important to make sure they are getting the proper nutrition so their body is at the optimal performance (for that patient).
Objective Data: <ul style="list-style-type: none"> • Wheezing • SOB- especially upon exertion • Oxygenation saturation decrease • Blue/grey lips or fingernails • Inability to speak full sentences • Swelling/edema • Tachycardia • Barrel chest • “Pink puffers” (difficulty catching their breath, face redden while gasping for air) 	Monitor Oxygen saturation	****Give oxygen as ordered and needed. Be careful about turning their drive to breath off by giving too much O2, as a general rule, emphysema patients should be kept around 88%-92%.****
	Breathing treatments and medications	Beta-Agonists: Such as albuterol work as bronchodilators Anticholinergics: Such as Ipratropium work to relax bronchospasms Corticosteroids: Such as Fluticasone work as an anti-inflammatory
	Assess for/Administer influenza vaccine and pneumococcal vaccine	Preventing complications such as influenza or pneumonia is important because the lungs are already working harder to keep the body balanced with oxygen and CO2, an increased risk of infection only complicates the patient's ability to breathe.