

(IMPAIRED GAS EXCHANGE) NURSING CARE PLAN

Medical Diagnosis: Impaired Gas Exchange

| Subjective Data: | Nursing Intervention (ADPIE) | Rationale |
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| <ul style="list-style-type: none"> • Restlessness • SOB/orthopnea • Lightheadedness | Assess respiratory function- (respirations, O2 sat, skin color, vitals) | Baseline respiratory assessment. Can see if interventions you do are effective or if they are getting worse |
| | Position patient in high Fowler's position for increased oxygenation and ventilation | Keeping the patient sitting upright helps with proper gas exchange and better oxygenation into the lungs |
| | Administer medications as ordered (needed) Bronchodilators, pain medications) | Bronchodilators- open up the airways to allow patient to breath better Steroids- helps with inflammation Pain medications-helps with chest discomfort (but be careful of respiratory depression) |
| Objective Data: <ul style="list-style-type: none"> • Cyanosis • Coughing • Hypoxia • Abnormal ABG • Hypercapnia • Accessory muscle use • Hypoxemia • Decreased O2 • Shallow/rapid breathing • Wheezing | Give supplemental oxygen as needed | May need to give patient supplemental oxygen if they aren't above 90%. Titrate as needed |
| | Cluster your Care as much as possible | Doing too many activities (walking, talking, moving around) can exhaust a patient. Try to cluster as much as you can at once to allow them to rest. |
| | Cough/Deep breathing/Turn exercises as well as IS use | Proper exercises that help get more oxygen to body's cells and prevent pneumonia. IS- helps to keep the lungs clear. |
| | Suction equipment by bedside in emergency | In case the patient is having a hard time clearing their airway, it may be necessary to have suction available to help maintain oxygenation |
| | Obtain ABG's/labs/possible chest x-ray | ABG's- can indicate if patient has a metabolic or respiratory acidosis/alkalosis Labs- monitor hgb levels Chest x-ray |