

Ineffective tissue perfusion

Nr.	Nursing Diagnosis	Date	Nursing Intervention/s and tasks	Sign.
	<p>Ineffective tissue perfusion</p> <p>Related factors:</p> <ul style="list-style-type: none"> Altered affinity of hemoglobin for oxygen Decreased hemoglobin concentration in blood Diminished or interrupted blood flow—edema of operative site Enzyme poisoning Hematoma formation Hypervolemia Hypoventilation Hypovolemia Impaired transport of the oxygen across alveolar and/or capi Interruption of flow, venous Interruption of flow, arterial Mechanical reduction of venous and/or arterial blood flow Thrombus formation Tissue edema <p>Symptoms / Risk factors:</p> <ul style="list-style-type: none"> Abdominal distention Abdominal pain or tenderness Abnormal arterial blood gases Altered blood pressure outside of acceptable parameters Altered mental status Altered respiratory rate outside of acceptable parameters Altered sensations Altered skin characteristics (hair, nails, moisture) Arrhythmias Behavioral changes Blood pressure changes in extremities Bronchospasm Bruits Capillary refill > 3 seconds Changes in pupillary reactions Chest pain Claudication Decreased range of motion (ROM) or muscle strength Paresthesia or numbness Skin color pale on elevations, color does not return on lowe Weak or absent pulses <p>Outcome / Goal:</p> <ul style="list-style-type: none"> Patient has reduced risk of complication from disease Peripheral pulses present and strong Report or demonstrate normal sensations and movement Skin color and temperature normal (specify) _____ 		<p>Circulatory Care: Arterial Insufficiency</p> <ul style="list-style-type: none"> Monitor vital signs Administer intravenous (IV) fluids and blood if needed Apply direct pressure to bleeding site if hemorrhage occurs Assess color, sensation, movement, capillary refill Elevate affected extremities, as appropriate Inspect dressings and drainage device Maintain fluid replacement per protocol Monitor lab. Hgb/Hct and Coagulation studies Palpate peripheral pulses noting strength and equality Periodic assessments: sensation, movement, pulse, skin color, and temp. <p>Circulatory Precautions</p> <ul style="list-style-type: none"> Avoid injury to affected area Avoid leg crossing Check wound dressing and output from drain Keep extremity in depended position Keep extremity warm Maintain adequate hydration to prevent increased blood viscosity Monitor affected extremities for pulse, skin color, temprature and sensations Reduce external pressure points Refrain from taking blood pressure in affected extremity <p>Embolus Precautions</p> <ul style="list-style-type: none"> Instruct patient to report symptoms of reduced tissu perfusion such as pain Prepare to heparinize if prescribed <p>Vital Signs Monitoring</p> <ul style="list-style-type: none"> Monitor patient's vital signs and heart rythm every ____ hours Monitor urine output Obs sign of bleeding 	