# Respiratory Pneumonia



#### Pathophysiology

Infection that causes severe inflammation in the lungs which makes the alveoli to fill with mucus, fluid, & debris leading to impaired gas exchange where CO2 can't get out & oxygen now can't get IN, resulting in hypoxia (llow oxygen).



#### Signs & Symptoms

- 1. Altered Mental Status Restlessness, Agitation, Confusion
- Fever (Over 100.4 F/ 38°C).
- Productive cough "Yellow Sputum"
- 4. Fine or Coarse Crackles
- Dyspnea "Shortness of Breath"
- Pleuritic Chest pain (Pleural friction rub) Report to HCP







## Memory Trick

if the infection gets severe, the body releases chemicals

into the bloodstream to fight the infection resulting in

severe low blood pressure & total body inflammation which can damage multiple organs causing them to fail,

known as MODS - multiple organ dysfunction

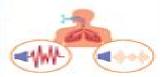




#### KAPLAN

Pleural friction rub?

 Grating sound or vibration heard during Inspiration and expiration



#### Common NCLEX Question

Priority Patient: who to see first?

✓ e Post operative patient with suspected pneumonia temp. of 98.2F, 5pO2 94% becoming restless & agitated.



## Critical Complications

#### 1. Pleural Effusion NCLEX TIP

Fluid that fills the pleural space (space between the lung itself & the chest wall) This prevents full expansion of the lung, resulting in decreased gas exchange.

#### KEY SIGNS

- D During inhalation Chest pain
- 2. D. Dresnova
- D Diminished breath sounds
- D Dull resonance on percussion.

#### Priority to report

- Asymmetrical Chest Expansion.
- · Decreased Breath sounds

#### Memory Trick:

S - Shock

syndrome.

S - Severely Low BP & perfusion

# ARDS (acute respiratory distress syndrome)

- Deadly STIFF lungs - ARDS - think HARDS hard stuff lungs



#### KEY SIGNS

Refractory Hypoxemia = Low PaO2

- Bill sintant to Oxygen.
- **REFractory Hygoseannia**



- S. Confusion
- 2. Agitation
- 3. Bothermore







#### Key signs

Hypotension NCLEXTIP

3. Septic Shock

- Systolic < 90 mm Hz</li>
- MAP < 65 mm Hz</li>
- Cap refill over 3 4 seconds
- Tachiyeandia
- Early Fever (Over 100.4)
- Late Hypothermia (Under 96.8)
- . Elevated WBC (norm: 10,000 or less)
- Decreased Urine Output
- 30 ml/hr or Less = Kidney Distress.









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**R Pring** 

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Critical Care Study Guide Gerard J. Criner, Rodger E. Barnette, Gilbert E. D'Alonzo, 2010-06-27 Critical care medicine is a dynamic and exciting arena where complex pathophysiologic states require extensive knowledge and up to date clinical information An extensive kno edge of basic pathophysiology as well as awareness of the appropriate diagnostic tests and treatments that are used to optimize care in the critically ill is essential Since our frst edition 7 years ago new information crucial to the care and understanding of the critically ill patient has rapidly accumulated Because this knowledge base crosses many different disciplines a comprehensive multidisciplinary approach presenting the information is essential similar to the multidisciplinary approach that is used to care for the critically ill patient We have strived to provide this content in an easily digestible format that uses a variety of teaching tools to facilitate understanding of the presented concepts and to enhance information retention To meet the demand to provide comprehensive and diverse education order to und stand the pathogenesis and optimum care of a variety of critical illnesses we have substitially revised the prior topics in the frst edition with updated information We have also markedly expanded the number of topics covered to include acute lung injury and the acute respiratory distress syndrome an expanded discussion of the physiology and operation of mechanical ventilation obstetrical care in the ICU neurosurgical emergencies acute co nary syndromes cardiac arrhythmias role of whole body rehabilitation in the ICU ethical conduct of human research in the ICU and nursing care of the ICU patient Critical Care Study Guide Steven E. Lucking, Frank A. Maffei, Robert F. Tamburro, Neal J. Thomas, 2012-04-10 This is the first comprehensive study guide covering all aspects of pediatric critical care medicine It fills a void that exists in learning resources currently available to pediatric critical care practitioners. The major textbooks are excellent references but do not allow concise reading on specific topics and are not intended to act as both text and study guide There are also several handbooks available but these are usually written for general pediatric residents and lack the advanced physiology and pathophysiology required for the higher level pediatric critical care practitioner Neonatal Intensive Care Nursing Exam Prep Study Guide Springer Publishing Company, 2023-04-24 Neonatal Intensive Care Nursing Exam Prep Study Guide gets right to the point with a targeted content based on the latest NCC exam blueprint This easy to follow guide includes all the tools you need to prepare practice and pass the exam and nothing you don't PREPARE Concise coverage of the content you ll be tested on Quick reference features with complications alerts and nursing pearls Need to know information to prepare you for exam day PRACTICE Two full length practice tests one in book and one online to assess your readiness and simulate the test taking experience Detailed rationales for correct and incorrect answers Pop guizzes that highlight key information you don t want to miss PASS The first time with Springer Publishing Exam Prep s 100% Pass Guarantee With confidence knowing you re well prepared with all the skills and knowledge you need on exam day and in practice With pride in your commitment to patient health and safety RNC NIC is a registered trademark of National Certification Corporation NCC NCC does not

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