

ACTIVE LEARNING TEMPLATE: *System Disorder*

STUDENT NAME _____

DISORDER/DISEASE PROCESS Preeclampsia

REVIEW MODULE CHAPTER Ch 9

Alterations in Health (Diagnosis)

20 weeks pregnant, high blood pressure and other organ failure symptoms.

Pathophysiology Related to Client Problem

Spiral arteries may show signs of defective invasion by cytotrophoblast cells.

Health Promotion and Disease Prevention

Using little/no added salt to food, drinking enough water

ASSESSMENT

Risk Factors

Family history of preeclampsia, chronic hypertension, new paternity, age (very young or above 40), first pregnancy, obesity.

Expected Findings

Swelling of hands and face as well as hyperreflexia.

Laboratory Tests

Urine test (Testing for high amounts of protein).
Blood test (Testing for increased amounts of uric acid)

Diagnostic Procedures

Patient must have a collection of symptoms including high blood pressure and others like low platelet count and protein in urine.

SAFETY CONSIDERATIONS

Pregnancy considerations include intubation difficulty, aspiration, aortocaval compression. Delivery consideration include expectation to deliver at any gestational age in cases of severe preeclampsia.

PATIENT-CENTERED CARE

Nursing Care

Thorough physical examination and early detection of signs of preeclampsia.

Medications

-Blood pressure medicines like Methyldopa, Labetalol and Nifedipine.
-Magnesium sulphate for seizure prevention

Client Education

Patient should know the causes, symptoms and preventive measures to mitigate preeclampsia.

Therapeutic Procedures

Fetus delivery if the pregnancy is at 37 weeks or more.
Bed rest to reduce blood pressure when pregnant.

Interprofessional Care

It is necessary that internists are informed of the latest diagnostic trends of preeclampsia.

Complications

Restriction of the growth of the fetus.
Abrupton of the placenta
HELLP syndrome
Preterm birth
Eclampsia
Damage of other organs
Development of cardiovascular diseases