STANDARDS OF CARE
ABDOMINAL/THORACIC ANEURYSM

Objectives:
1. To experience minimal blood loss.
2. To maintain adequate tissue perfusion.
3. To maintain vital signs within normal parameters.
4. To maintain skin integrity.
5. To experience adequate pain relief.
6. Provide education to patient and or family regarding disease process, plan of care and procedures.

Process Standards:
1. Monitor vital signs as per post – op orders.
2. Monitor frequently for evidence of decreased tissue perfusion: increased heart rate and decreased blood pressure, narrowing pulse pressure, pallor, cool skin, and diaphoresis.
3. For abdominal aneurysm resection: Monitor for abdominal discension and complaints of back pain every hour and document changes as present. Assess peripheral circulation every hour by palpation or Doppler. Document in nurse’s notes and notify physician immediately if any sign of decreased circulation.
4. For thoracic resection: Record chest tube output every hour. Notify physician if chest tube output greater than 150 ml per hour X 2 hours. Document color and consistency of drainage.
5. Administer blood products as ordered by physician.
6. Monitor urine output. Notify physician if < than 0.5ml/kg/hr.
7. Turn patient every 2 hours and assess pressure areas unless otherwise ordered by physician. WOC N consult.
8. Administer pain medication as ordered by physician.

Expected Outcomes:
1. Will have experienced minimal blood loss.
2. Will have maintained adequate tissue perfusion.
3. Vital signs will be stable for a minimum of 24 hours upon transfer.
4. Skin integrity will have not been compromised.
5. Will verbalize adequate pain relief using the Numeric Pain Relief Scale.
6. The patient and or family will verbalize understanding of disease process, plan of care, and procedures.

Reference: