

# Chronic bronchitis case study

Business



What clinical findings are likely in R. S. As a consequence of his COOP? How would these differ from those of emphysematous COOP? Chronic bronchitis, also known as type B COOP or “blue bloater” in most cases (90%) is caused by cigarette smoking with the typical patient being overweight.

It is symptomatically diagnosed with a conformation of chest radiography showing increased bronchial vascular markings, congested lung fields, enlarged horizontal cardiac silhouette and evidence of previous pulmonary infection (this is why Re’s right lower lobe is thought to be consistent with pneumonia).

As well pulmonary function tests show normal total lung capacity, increased residual volume, and decreased FEE. Arterial blood gas evaluation may show elevated  $P_{aCO_2}$  and decreased  $P_{aO_2}$  (often below mm Hg). Secondary polycythemia related to continuous or nocturnal hyperemia is common, which leads to a compensatory production of red blood cells in an attempt to carry more oxygen to the body tissues. Emphysema, also known as type A COOP or “pink puffer” is rather than being symptomatically diagnosed, is pathologically defined. It is however, typically associated with chronic bronchitis.

Patients also typically have a smoking history, and rather than being overweight are thin and may or may not show signs of pneumonia. Ninth a chest x-ray. Upon having type A COOP, arterial blood gas values typically reveal a normal mild decrease in  $P_{aO_2}$  (65-75 mmHg) and a normal (or in late stages, elevated)  $P_{aCO_2}$ . Interpret R. S.’s laboratory results. How would his acid-base disorder be classified? Neat is the most likely cause of his

polytheism? For normal adults, arterial blood gas levels include Apace 36-44 meg, HCl- 22-26 meg/L, and pH 7.

35-7. 45. With that being said, RSI has increased levels of

Apace and HCl- with a decreased pH level thus leading to the conclusion that RSI is in respiratory acidosis. His Apace level is increased because of impaired gas exchange, and HCl- also increased because of renal compensation in this chronic condition, all of which stem from Type B COOP (chronic bronchitis) Polytheism results in increased blood viscosity and volume due to the increase in number of red blood cells, and as mentioned previously type B COOP is where this is stemming from for Re's condition (due to continuous hyperemia). Cooperates, L.

, ; Banks, J. (2010). Pathologically. (4th De. , chap 13, chap 22, chap 25).  
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