

Pvd case study

Business



The likely source of his calf pain and his hip pain is that he has a history of PAD which is a chronic condition in which partial or total arterial occlusion deprives the lower extremities of oxygen and nutrients. He also has a history of atherosclerosis and it is the most common cause of chronic arterial obstruction. Common risk factors are hypertension, hyperglycemia, and diabetes mellitus, smoking cigarettes, and being obese. S. P. Goes smoke, he has hypertension, and he has elevated cholesterol levels which lead to atherosclerosis.

This is causing his calf and hip pain. He is also overweight. These symptoms also known as intermittent claudication occurs because there is not enough blood flow to the leg muscles during exercise. 2. Two risk factors for claudication are his increasing blood pressure and his high cholesterol. They are risk factors because cholesterol leads to claudication by blocking the arteries.

The cholesterol is a buildup of plaque that causes the blockage.

Hypertension is a risk factor because as BP increases the wall of the arteries are subjected to greater than normal forces which damage the arterial lining. In attempt to repair, the immune cells filled with oxidized cholesterol lodge in the arterial lining, forming plaques. 3. A, b, c, d and f. 4.

S. P would complain of pain in the foot and cramps. 5. The purpose of aspirin is to decrease inflammation and prevent blood clots. 6. You may want to wear loose, comfortable clothing that allows the technician performing the ankle-brachial index test to easily place a BP cuff on your ankle and per arm.

Having an ABA is painless and similar to getting your BP taken in a routine visit. 7. His ABA results indicate a diagnostic of PAD. 8. I would address methods to promote vacillation.

I would teach him to avoid raising legs above the level of the heart unless venous stasis is present. I would encourage patient to stop smoking because it is the most effective way to prevent vasoconstriction. I would tell him to limit dietary fat intake to less than 30% of total daily calories.

I would remind him to drink adequate liquids to prevent dehydration ND to increase blood viscosity. I would recommend a physical therapist to increase exercise. Also I would recommend decreasing cholesterol intake because it reduces the formation of plaque to the arteries.

I would also address to decrease his blood pressure. 9. A physical therapist will help because they will help S. P. Develop a personalized plan of care that incorporates a balance of exercise with rest that can assist with the improvement of blood flow in the extremities.

Exercise strengthens useless and trains muscles to function with less oxygen and helps muscles to work better despite impaired blood flow to the legs.

As a result he will do more exercise with less pain and be more active with an overall increase in health and well-being. 10. I recommend S. P. To avoid raising his legs above the heart because extreme elevation slows arterial blood flow to the feet. I would tell him to maintain a warm environment at home and to wear socks or insulated shoes at all times, never apply direct heat to the limb.

Drink adequate fluids to prevent increased blood viscosity. Keep feet dry, keep toenails clean/files, apply lotion to feet, and avoid constricting garments on feet. 11. He should avoid compression on his legs to avoid 1 OFF legs above the heart because extreme elevation slows arterial blood flow to the feet. 12. If bleeding occurs call the doctor.

Also call the doctor once you have black/bloody stools or if you cough up blood or vomit look like coffee grounds. Avoid drinking alcohol because it may increase risk of bleeding in the stomach or intestines.