

Patient-Family Teaching Tool

TOPIC: PNEUMONIA

Purpose: To provide the patient and family with knowledge of pneumonia, and its treatment.

Content:

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| A. Definition Of Pneumonia | E. Description Of Treatments |
| B. Characteristics Of Pneumonia | F. Reasons To Contact The Physician |
| C. Signs And Symptoms Of Pneumonia | G. Discharge Instructions |
| D. Diagnostic Tests | H. Community Resources |

Learner Objectives:

A. The Patient/Family Defines Pneumonia.

1. Pneumonia is an infection that enters the lungs through the breathing passages, causing them to fill with mucus and phlegm.
2. Pneumonia is not a contagious disease, so you do not have to worry about infecting your loved ones or others.

B. The Patient/Family Describes The Characteristics Of Pneumonia.

1. Pneumonia may occur alone or in addition to other medical problems.
2. Medical problems that cause you to be more likely to get pneumonia are chronic lung disease (COPD), immune deficiencies, sinus infections, or a sore throat that is not treated.
3. Pneumonia can be classified according to cause (bacterial or viral) and according to the area of the lung involved (lobar, bronchial, etc.)
4. Most bacterial and viral pneumonia's occur during winter and spring.
5. Treatment of pneumonia is aimed at killing the organism with antibiotics if bacterial and clearing the lungs of congestion which will assist you in breathing more easily.

C. The Patient/Family Identifies The Signs And Symptoms Of Pneumonia.

1. Increased temperature and increased heart rate are common.
2. Increased breathing rate is often accompanied by a feeling of difficulty when trying to breath.
3. Dry hacking cough progresses to a looser cough with an increase in sputum.
4. A change in color may occur. You may become dusky or bluish around the mouth, nail beds, or mucous membranes. You may also be slightly grayish, depending on the need for oxygen.
5. You may experience cold-like symptoms: stuffy nose, irritability, etc. These often precede pneumonia.
6. Other frequent symptoms include a decrease in appetite, nausea, vomiting, and diarrhea. The patient may also be extremely lethargic and irritable.
7. You may have a dull pain in the chest area, either in the front or in the back of the chest.

D. The Patient/Family States The Diagnostic Tests And Describes How They Are Used To Monitor The Patient's Condition:

1. Frequent blood sampling:
 - a. To determine if pneumonia is viral or bacterial.
 - b. To determine what bacteria is present and what antibiotics will treat it.
 - c. To follow progress of the infection and its response to the chosen medication.
2. Sputum specimen:
 - a. To determine what bacteria is present and what antibiotics it is sensitive to.

3. Chest x-rays:
 - a. To show the location of the pneumonia.
 - b. To determine if improvement or worsening of pneumonia is occurring.
4. Frequent vital signs and assessment of breath sounds
 - a. To monitor changes in temperature, heart rate, or breathing rate.
 - b. To determine the location and thickness of secretions in the lungs, which allows the doctor to concentrate treatment on these areas.

E. The Patient/Family Explains The Reasons For Specific Treatments Being Used.

1. The treatment of pneumonia may include some or all of the following medications:
 - a. Antibiotics to kill the organisms which may be causing the infection.
 - b. Bronchodilators to relax the muscles of the breathing tubes. This causes the bronchioles (breathing tubes) to widen and allow air in and out more easily. Bronchodilators can be taken as pills, aerosol sprays, liquids, or intravenous administrations.
 - c. Steroids to decrease the inflammations of the lungs. Steroids are often given intravenously during the first few days of hospitalization, but can be given in pill or aerosol form.
2. Oxygen is also a drug. It aids in supplying additional oxygen to the blood when the diseased part of the lung is unable to do so, thus enabling you to breathe more easily. If oxygen is needed, your doctor will prescribe a specific amount of oxygen to be used to overcome the oxygen deficit and restore adequate oxygenation levels. No smoking is allowed when oxygen is in use - oxygen is flammable. Oxygen levels may be monitored periodically with a device called a pulse oximeter (or pulse ox). The oximeter is placed on your finger and after a few moments it measures the level of oxygenation in your blood stream.
3. Intravenous fluids may be needed to maintain hydration and to administer the antibiotics.
4. A respiratory therapy treatment may used to moisten the respiratory tract and loosen secretions from lung walls to re-expand collapsed areas of the lung and relieve congestion.
5. Suction is used when you are unable to cough up secretions. If left in the lungs, these secretions would cause more infection.

F. The Patient/Family State Reasons To Notify Physician.

1. Signs and symptoms of a possible recurrence of pneumonia:
 - a. Elevation of temperature, heart rate, or breathing rate, which may be accompanied by increased difficulty in breathing. Note any changes in your skin color.
 - b. Dry hacking cough with increased sputum production.
 - c. Stuffy nose, irritability, and decrease in appetite. These symptoms may also be followed by nausea, vomiting, and diarrhea.
2. If you have these symptoms, notify your physician.
3. If you are 65 years of age or older, or if you have a chronic disease (such as cardiovascular disease, pulmonary disease, diabetes, etc.), talk to your doctor about getting a Pneumonia vaccination and a yearly flu shot.

**G. The Patient/Family State Understanding Of Discharge Instructions Given.
See Discharge Instruction Sheet.**

1. You will be given a copy of the Discharge Instruction Sheet.
2. Be sure to keep your follow-up appointment to see your physician.

3. When you get new prescriptions filled, a pharmacist will discuss the new medications with you.

H. The Patient/Family Identifies Available Community Resources.

1. American Lung Association
(323) 935-5864 or (800) LUNG-USA
2. Advantage Program-Torrance Memorial Medical Center
Community Education Lecture Series
(310) 517-4666

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