# Thoracic Disorders

<table>
<thead>
<tr>
<th></th>
<th>Pneumothorax</th>
<th>Hemathorax</th>
<th>Tension Pneumothorax</th>
<th>Pleural effusion</th>
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</thead>
<tbody>
<tr>
<td><strong>Patho</strong></td>
<td>air or gas in pleural space d/t hole in the chest wall or diaphragm, leads to lung collapse</td>
<td>blood in pleural space d/t traumatic injuries and surgeries.</td>
<td>air leaks into pleural space and cannot escape causing ↑ pressure and ↓ cardiac output. d/t trauma or high pressures from mechanical ventilation.</td>
<td>fluid in pleural space most commonly d/t CHF, pneumonia, malignancy, PE.</td>
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<tr>
<td><strong>S/S</strong></td>
<td>pleuritic pain, anxiety signs of respiratory distress* cough referred pain to shoulder/back reduced/absent breath sounds ↓ fremitus absent egophany on that side absent bronchophony asymmetrical chest wall hyperresonance on percussion subQ emphysema cyanosis (late sign)</td>
<td>pleuritic pain, anxiety signs of respiratory distress reduced/absent breath sounds asymmetrical chest wall dull percussion subQ emphysema</td>
<td>pleuritic pain, anxiety signs of respiratory distress reduced/absent breath sounds asymmetrical chest wall mediastinal shift tracheal deviation JVD</td>
<td>chest pain (constant or pleuritic) signs of respiratory distress nonprod. or purulent cough hemoptyis decreased/absent BS dullness to percussion ↓ tactile fremitus egophany, pleural friction rub asymmetric chest wall movement mediastial shift if &gt; 1000 mL w/empyema: fever, malaise, wt loss</td>
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<tr>
<td><strong>Key tests</strong></td>
<td>CXR, ABG, CBC</td>
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<td>CXR, US or CT thoracentesis to assess fluid</td>
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</tbody>
</table>
| **Tx**         | -treat underlying condition  
-100% O2  
-pleurodesis in recurrent cases  
-chest tube or 3-sided dsng  
-VAT w/pleurodesis | -treat underlying problem  
-O2  
-chest tube  
-thoracotomy  
-VAT | -chest tube STAT  
-O2 | -treat underlying cause (if CHF give diuretics, if pneumonia give Abx, if inflammatory give steroids)  
-chest tube  
-thoracentesis to remove fluid  
-pleurodesis |
| **Nursing care**| -BR while tube in place (?)  
-serial CXR and ABGs  
-monitor chest tube system  
-resp. assessment, VS, pain  
-encourage IS  
-ROM  
-monitor S/S of tens. pneumo | -monitor amount/quality drainage  
-serial CXR and ABGs  
-monitor chest tube system  
-resp. assessment, VS, pain  
-assess dressing  
-encourage use of IS  
-ROM, ambulation as ordered | -serial CXR and ABGs  
-monitor cardiac status  
-monitor chest tube system  
-resp. assessment, VS, pain  
-encourage use of IS  
-ROM, ambulation as ordered | -monitor amount/quality drainage  
-monitor chest tube system  
-respiratory assessment, VS, pain  
-assess dressing  
-encourage use of IS  
-ROM, ambulation as ordered |

* Signs of respiratory distress: tachypnea, tachycardia, hypoxia, cyanosis, dyspnea, use of accessory muscles