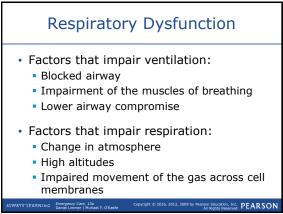


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idual volumi

The Airway The Lungs Tidal volume Must have an open (patent) airway for system to function Volume of air moving in and out during each breath cycle • Upper airway obstructions are common. 600 Caused by foreign bodies, infection, or 5000 Inspiratory serve volume Tidal Volume × trauma 4000 Respiratory Rate = 3000 Minute Volume idal volume 2000 Expiratory serve volume Amount of air moved in 1000 and out of lungs in one minute PEARSON PEARSON

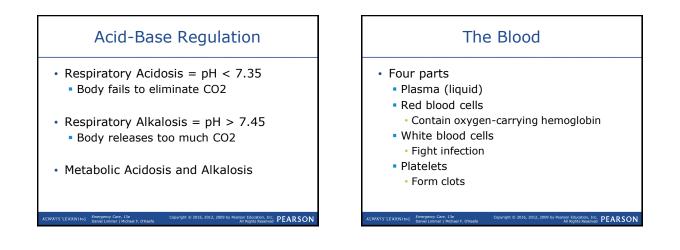


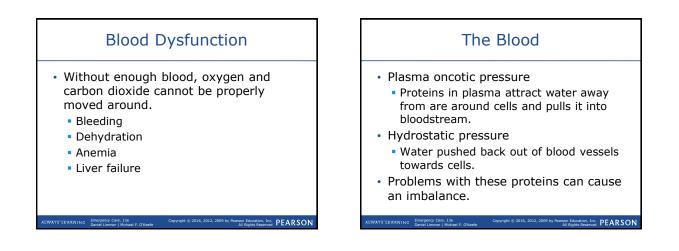


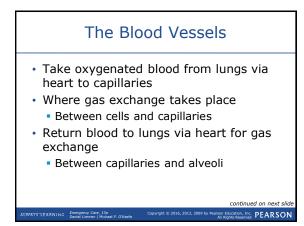
Respiratory Compensation

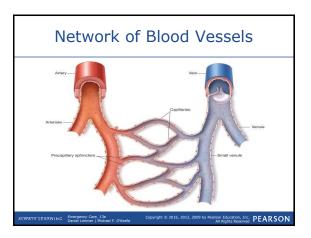
- Body attempts to compensate for gas exchange deficits.
- Chemoreceptors detect changing oxygen and carbon dioxide levels.
- Brain stimulates respiratory system to increase rate and/or tidal volume.

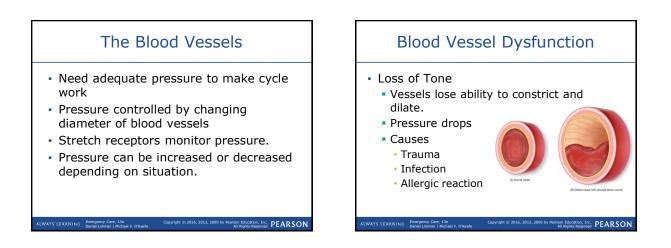
All Bights Reserved PEARSON

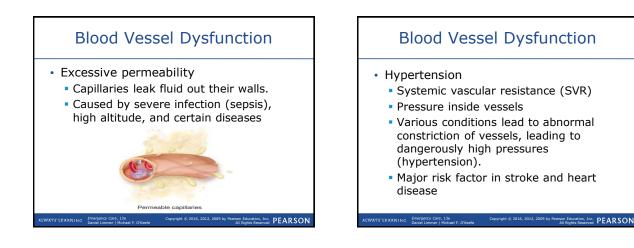


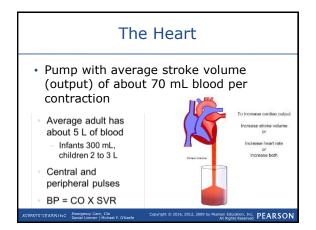


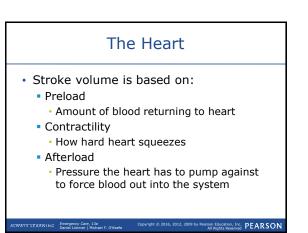












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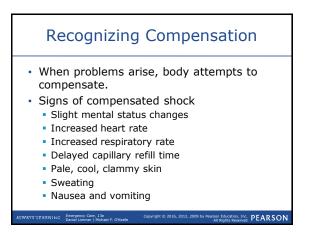
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Cardiac Output (CO) Heart Dysfunction Stroke volume × beats per minute = CO Slowing heart rate or decreasing stroke Mechanical problems volume reduces cardiac output. Physical trauma Very fast heart Squeezing forces CARDIAC OUTPUT rates reduce Cell death (heart attack) cardiac output. Electrical problems Inadequate time Damage to heart's ability to regulate for heart to refill rate between contractions CO = HR X PEARSON

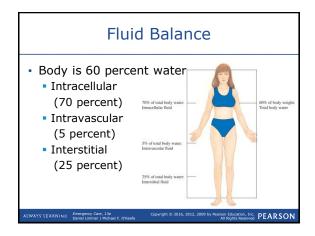
The Cardiopulmonary System: Putting It All Together Entire cardiopulmonary system must work together to maintain life. Must be a balance between ventilation (V) and perfusion (Q) for system to work properly V/Q match Any breakdown in system impacts ratio causing possible life-threatening situation. PEARSON

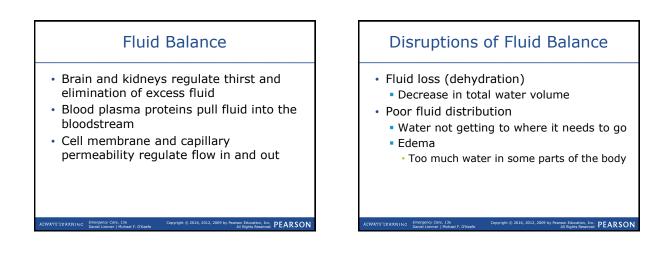
Shock
 Perfusion Regular delivery of oxygen and nutrients to cells and removal of waste products Hypoperfusion Breakdown in system Can result in death of patient

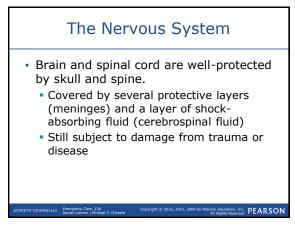
Type of Shock	Insult	Physiologic Effect	Compensation
Cardiogenic	Heart fails to pump blood out •MI, arrhythmia, aortic stenosis, mitral regurg,	↑CO	BaroRc ↑SVR
Obstructive	Heart pumps well, but the outflow is obstructed "Extracardiac obstructive causes such as PE, tension pneumothorax, tamponade	¢CO	BaroRc †SVR
Hypovolemic	Heart pumps well, but not enough blood volume to pump Hemorhage Fluid Loss (Vomiting, Diarrhea, Burns)	↑CO	BaroRc ↑SVR
Distributive	Heart pumps well, but there is peripheral vasodilation *Septic, anaphylactic, and neurogenic shack *Pancreatitis, burns, multi-trauma via activation of the inflammatory response	↓SVR	†C0











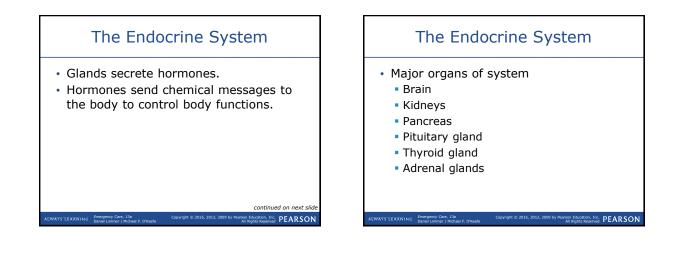
Nervous System Dysfunction

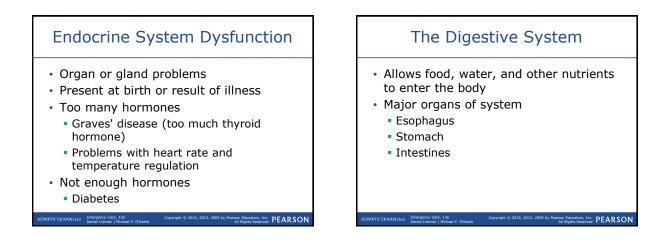
- Trauma
 - Motor-vehicle crashes
 - Falls
 - Diving accidents
- Medical Causes

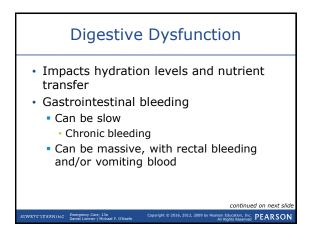
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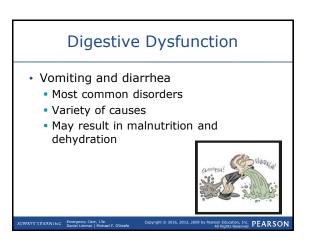
- Strokes
- Infection (meningitis, encephalitis)
- Disease (Lou Gehrig disease, MS)
- Low blood sugar (hypoglycemia)

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The Immune System

- Responsible for fighting infection
- Responds to specific body invaders by identifying them, marking them, and destroying them

Hypersensitivity (Allergic Reaction)

- Results in a rapid drop in blood pressure
- Can be life threatening
- Result of exaggerated immune response
- Chemicals affect more than just invader

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Remember

- Cellular metabolism requires a constant supply of oxygen and glucose. Absence of either component disrupts normal metabolism.
- Cardiopulmonary system combines the functions of respiratory and cardiovascular systems to provide oxygen at the cellular level.

continued on next sli

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Critical Thinking

- You have a patient with a massive infection (sepsis). This has impaired the patient's ability to regulate the size of the blood vessels.
- How might this affect the patient's ability to compensate for any additional illnesses? What steps should you take to help this patient compensate?