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# Myocardial Infarction

Patient name: \_\_\_\_\_ Admission: \_\_\_\_\_

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- I. The client/caregiver can define myocardial infarction.
  - A. A myocardial infarction results from reduced or blocked blood flow through one of the coronary arteries to the myocardial tissue.
  - B. This blockage causes death of the heart tissue.
- II. The client/caregiver can list factors that may increase risk of myocardial infarction but cannot be changed.
  - A. Increasing age
  - B. Gender (men are at greater risk)
  - C. Heredity, which includes individual family history and race
- III. The client/caregiver can list major risk factors that can be modified to decrease risk for heart disease.
  - A. Use of tobacco products
  - B. High blood cholesterol
  - C. High blood pressure
  - D. Physical inactivity
  - E. Obesity
  - F. Diabetes mellitus
  - G. Stress
  - H. Alcohol abuse
- IV. The client/caregiver can recognize signs and symptoms of a myocardial infarction.
  - A. Chest discomfort or pain often described as an uncomfortable pressure, crushing or squeezing pain, or substernal pain. Pain usually occurs in the middle of chest.
  - B. Discomfort or pain in one or both arms, back, neck, jaw or stomach
  - C. Shortness of breath
  - D. Complaints of nausea, lightheadedness, or sweating
  - E. Anxiety or feeling of dread

- V. The client/caregiver will know what to do if signs of myocardial infarction occur.
  - A. Remain calm and assist client into comfortable position.
  - B. Call 911.
  - C. Follow any previous instructions from physician regarding medication to be used in this type of emergency.
  - D. If the client loses consciousness and no pulse is found, cardiopulmonary resuscitation should begin and continue until trained help arrives.
- VI. The client/caregiver can list measures to prevent a reoccurrence of myocardial infarction.
  - A. Explain the medication treatment plan ordered by physician. Understanding the medication regimen will promote compliance.
  - B. Lose weight if overweight (weight-loss diet guide).
  - C. Follow the cardiac disease dietary recommendation of low-fat, low-cholesterol, and low-sodium diet (give related teaching guides).
  - D. Encourage client to participate in a cardiac rehabilitation program.
  - E. Understand physical limitations as dictated by physician and cardiac rehabilitation program. Clarify when and how to resume sexual activity.
  - F. Monitor blood pressure and pulse.
  - G. Avoid alcohol.
  - H. Avoid use of tobacco products (tobacco-cessation guide).
  - I. Learn and use stress-management techniques (stress-management guide).
  - J. Learn what symptoms to report to physician immediately, such as chest pain, shortness of breath, or changes in blood pressure or pulse.

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- K. Monitor and report symptoms of depression to physician.
- L. Use Medic Alert cards or bracelets indicating health history and medications.

**VII. The client/caregiver is aware of possible complications.**

- A. Dysrhythmias
- B. Cardiogenic shock
- C. Arterial or pulmonary embolism
- D. Pericarditis
- E. Mitral insufficiency

**RESOURCES**

American Heart Association  
[www.americanheart.org](http://www.americanheart.org)

National Institutes of Health  
[www.nih.gov](http://www.nih.gov)

American Red Cross Services—CPR  
[www.redcross.org/services](http://www.redcross.org/services)

American Dietetic Association  
[www.eatright.org](http://www.eatright.org)

Cardiac rehabilitation programs offered at many hospital centers

Support groups for weight control and smoking cessation

United States Department of Health and Human Services  
[www.surgeongeneral.gov/tobacco/](http://www.surgeongeneral.gov/tobacco/)

U.S. Food and Drug Administration  
[www.fda.gov/hearhealth](http://www.fda.gov/hearhealth)

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