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Thrombophlebitis

Patient name: _____

Admission: _____

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- I. The client/caregiver can define thrombophlebitis.**
- It is an inflammation of the vein with a clot or thrombus formation.
 - It usually occurs deep in the lower extremities but may occur in other areas of the body.
 - Clots forming in the deep veins are deep vein thrombosis (DVT).
- II. The client/caregiver can list factors that increase the risk of thrombophlebitis.**
- Immobility or inactivity
 - Reduced cardiac output
 - Oral contraceptives
 - Trauma or injury that creates compression of the veins of the pelvis or legs
 - Varicose veins
 - Intravenous therapy
 - Advancing age
 - Cardiac and blood vessel disease
 - Cigarette smoking
 - Obesity
 - Surgery
 - History of thrombophlebitis
 - Gender (more common in women)
- III. The client/caregiver can list signs and symptoms; often no signs or symptoms are present.**
- Heat, redness, and swelling along the affected vein
 - Fever, malaise, fatigue, and possibly anorexia
 - Positive Homan's sign (pain upon extending or straightening toes)
- IV. The client/caregiver can list measures for prevention.**
- Avoid constrictive clothing.
 - Avoid smoking, alcohol, and caffeine.
 - Lose weight if overweight.
 - Avoid oral contraceptives. Discuss other methods of birth control with physician.

- E. Avoid prolonged sitting and crossing the legs at the knee.**
- F. Avoid standing for long periods and shift weight frequently when standing.**
- G. Exercise daily.**
- V. The client/caregiver can list measures for treatment.**
- Maintain bed rest until the physician removes activity restrictions. Elevate the affected extremity in a straight line using pillows without bending the knee.
 - Complete rest of the affected extremity as ordered by physician.
 - Apply warm moist compresses or apply an aquathermia pad to protected skin over affected area as ordered. Remove and reapply compresses after 20 minutes or sooner if cooling occurs. Remove the aquathermia pad every 2 hours for 20 minutes to do skin assessment.
 - Wear knee or thigh-high antiembolism hose if prescribed by the physician. (Remove every 8 hours to assess extremity and condition of skin.) Launder hose if soiled and have extra pair for continual use.
 - Use pneumatic compression device to the affected area if prescribed by the physician.
 - Take nonnarcotic analgesics and anti-inflammatory agents as ordered.
 - Take anticoagulants therapy or drugs that prevent platelet aggregation may be ordered. Obtain ordered laboratory tests to help physician determine the effectiveness of medication.
 - Observe for symptoms of impaired clotting such as nosebleeds, bleeding gums, or easy bruising.
 - Avoid massaging extremity to prevent emboli.
 - Eat a well-balanced diet.
 - Increase fluid intake to at least six to eight glasses per day.

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- L. Keep follow-up appointments with physician.
 - M. Avoid over-the-counter medications or supplements unless approved by physician.
 - N. Measure the size of affected extremity daily.
 - O. Report increase in size of extremity, skin breakdown, redness, pain, warmth, and numbness.
 - P. Keep follow-up appointments with physician.
 - Q. Use Medic Alert bracelet or card to identify coagulation therapy if used.
- VI. The client/caregiver is aware of possible complications.**
- A. Pulmonary embolism
 - B. Venous insufficiency
 - C. Stroke

RESOURCES

Support groups for cessation of smoking and weight loss.

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