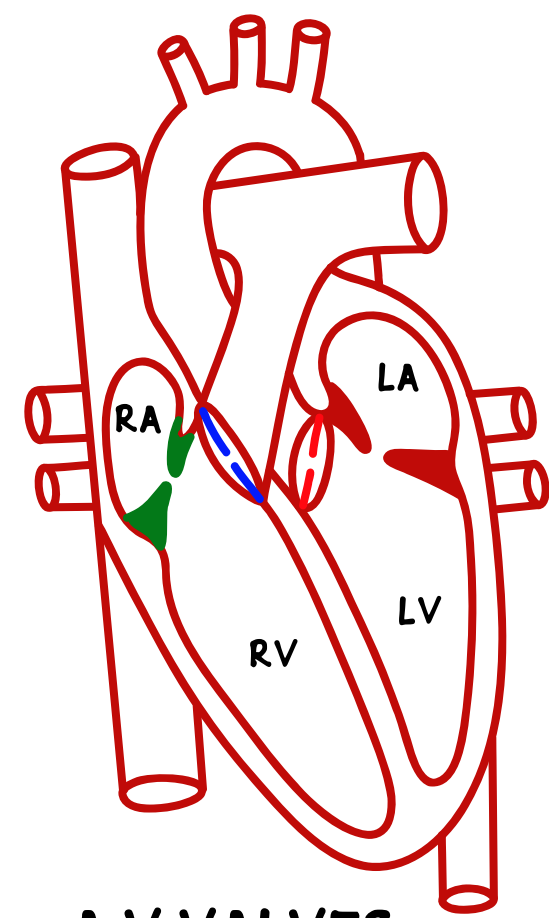


-HEART VALVES CANNOT

*OPEN FULLY = STENOSIS -THICKER

*CLOSE COMPLETELY = INSUFFICIENCY
REGURGITATION



A.V. VALVES

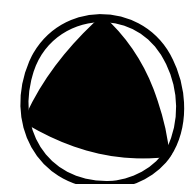
- TRICUSPID LUB
- MITRAL

S.L. VALVES

- PULMONIC DUB
- AORTIC

NORMAL

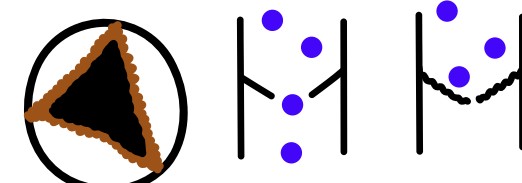
OPEN



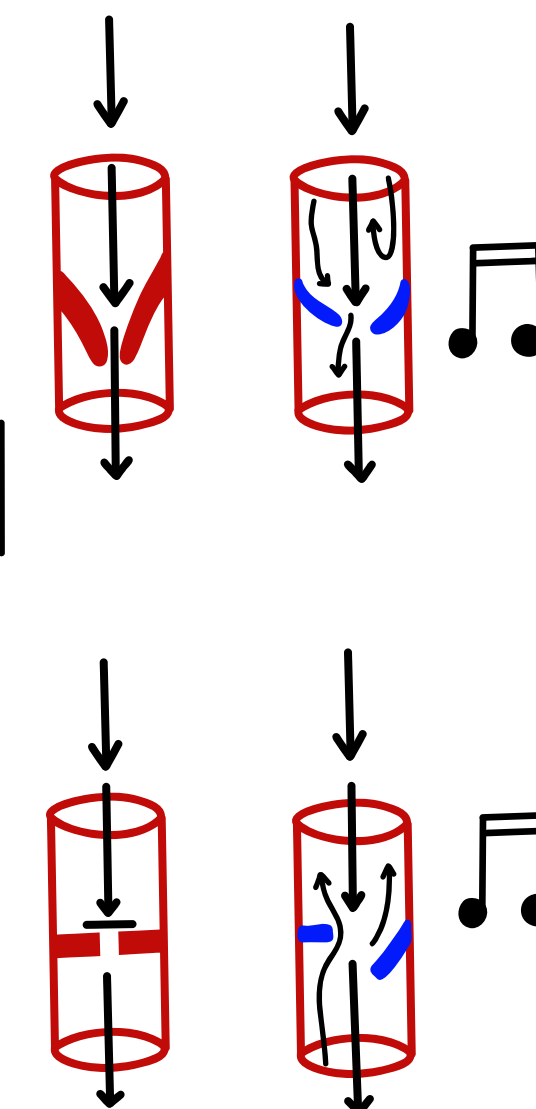
CLOSED



STENOSIS



REGURGITATION



CONGENITAL - FROM BIRTH - ALL 4 VALVES

ACQUIRED:

- DEGENERATIVE - OVERTIME, MECHANICAL STRESS
- RHEUMATIC - FIBROTIC/CALCIFICATION CHANGES
- INFECTIVE - INFECTIOUS ORGANISM (STREPTOCOCCAL)

AORTIC STENOSIS



AORTIC REGURGITATION



RISK FACTORS

- HYPERTENSION
- RHEUMATIC FEVER
- CONGENITAL MALFORMATION
- INFECTIVE ENDOCARDITIS
- MARFAN SYNDROME

SYMPTOMS:



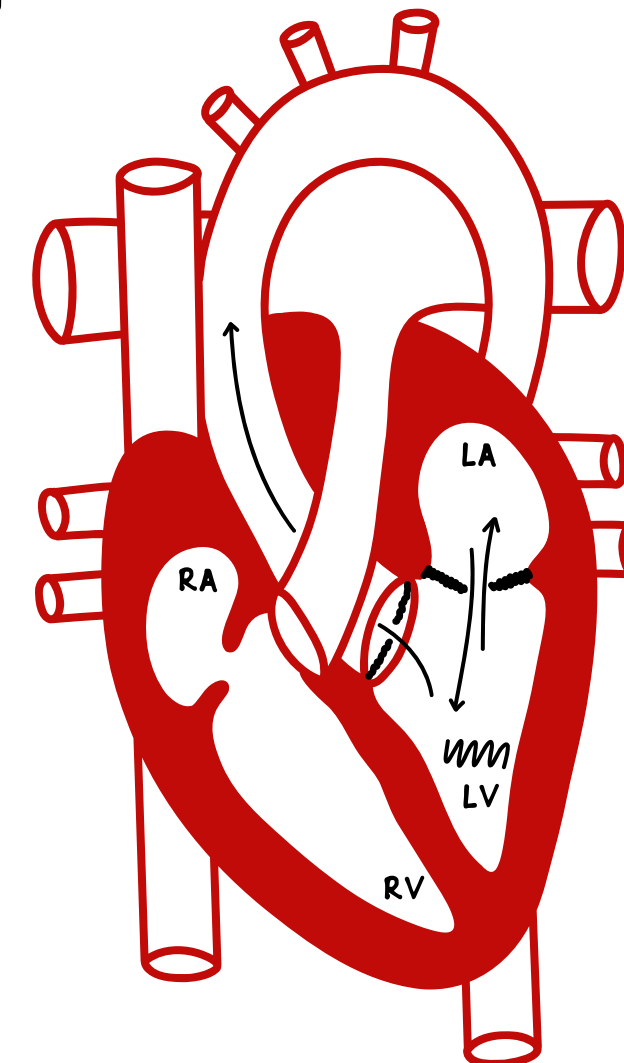
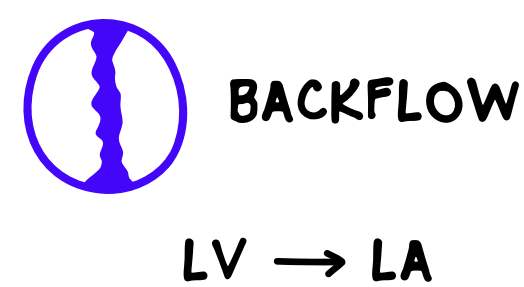
- DIZZINESS
- FATIGUE
- SOB/DYSPNEA
- ANGINA/CP

* EACH PATIENT VARIES W/ EACH CASE

MITRAL STENOSIS



MITRAL REGURGITATION



NURSING CARE & PATIENT EDUCATION

DIAGNOSED W/ ECHO

SURGERY: XENOGRFT - ANOTHER SPECIES
ALLOGRAFT - CADAVER
AUTOGRAFT - PATIENTS OWN

7-10 YRS

● INCISION CARE + COMFORT

● TELEMTRY

● WEIGHT GAIN * 3 LBS IN 1 DAY
* 5 LBS IN 1 WEEK

● ANTICOAGULANTS

AVOID: NSAIDS, ASA

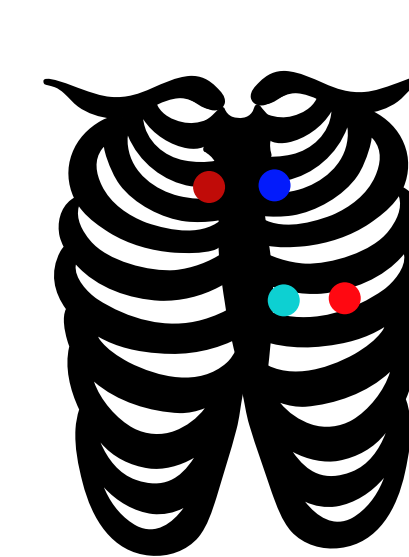
GINKGO BILOBA

● ANTIBIOTICS

● REPORT: RASH
FEVER
SOB
WEIGHT GAIN

-CAFFEINE,
ALCOHOL,
EPHEDRINE,
EPINEPHRINE

ASSESSMENT:



MURMUR

EKG

PALPITATIONS

NECK, SWELLING

