



CASE PRESENTATION

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Demographic data

- Name of the patient :- Mr. Suresha. P
- Age :- 72 years
- Sex :- Male
- Registration no. IP2510210026



Diagnosis

- Acute pulmonary edema
- Respiratory failure
- Hypertension



Chief Complaint

- % Fever sudden onset, high grade since 5 days
- % Profuse sweating since today morning
- % Cough expectoration
- % Breathlessness since 3 days



Past or Family history

- Past history :- Hypertension
- Family history :- Nothing significant



Events

- Patient received from casualty to MICU with the complaint of high fever, breathlessness, excessive sweating and cough expectoration
- Patient is not fully conscious
- Vitals are checked and recorded
 - HR : 90bpm
 - BP : 160/90
 - SpO₂ : 65%
 - RR : 25bpm
 - Temp : 97.3° F
- patient is diagnosed with Acute pulmonary edema, Respiratory failure and hypertension
- patient is connected to ventilator



General examination

Vital signs

- HR : 90 bpm
- RR : 25 bpm
- Bp : 160/90
- Temp : 97.3° F
- SpO₂ : 65%



Systemic evaluation

- GCS : E4 V5 M6
- CNS : No abnormalities detected
- CVS : S1 S2 heard (Normal heart sound)

Renal system examination

- Urine output : 41 ml/kg/24hrs
- Urine color : pale yellow



Gastrointestinal examination

- Appetite : Normal
- Bowel : Normal



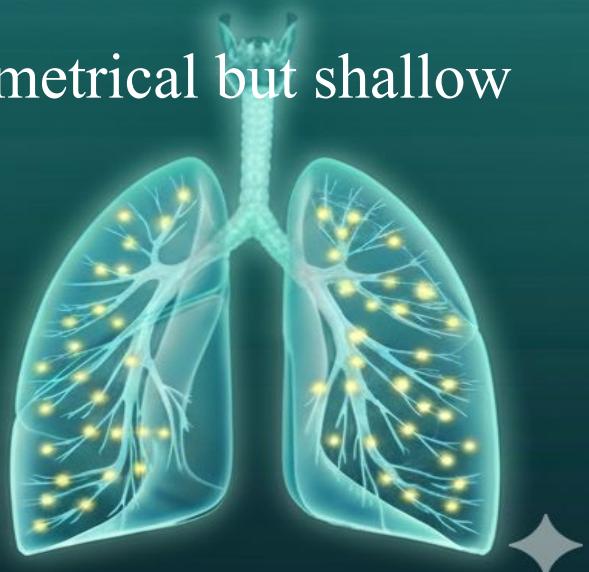
Investigations

- RBC :- 3.41million/cu.mm
- WBC:- 12.88 cu. mm
- PLT :- 2.77lakhs/cu.mm
- Hb :- 9.2g/dL
- Na⁺ :- 142mEq/L
- K⁺ :- 3.8mEq/L
- Creatinine :- not mentioned
- BUN :- 17mg/dl

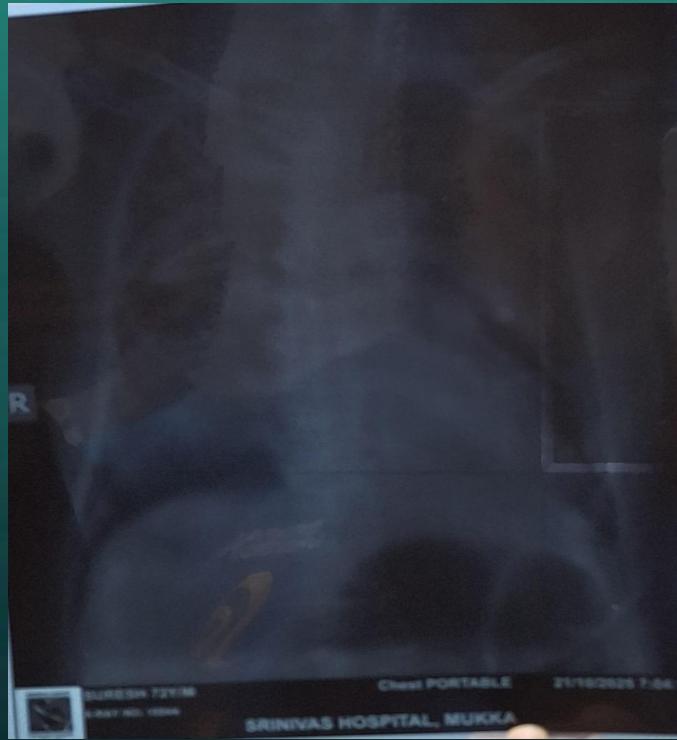


Respiratory system examination

- Inspection : Increased work of breathing (tachypnea)
- Palpation : chest expansion approximate symmetrical but shallow
- Percussion : Resonant, No focal dullness
- Auscultation : Rhonchi



Chest x-ray



ABG interpretation

- pH :- 7.43
- paO₂ :- 38mmHg
- paCO₂ :- 75.9mmHg
- HCO₃ :- 50.7mmol/L



Day 1 (21/10/25)

- Patient is received from casualty to MICU with the complaint of fever, Breathlessness, cough, profuse sweating and hypertension.
- Patient is not fully conscious
- vital signs:

HR- 100bpm RR- 22bpm

Spo2 - 90% Temp- 96. 8°F

Bp- 140/90 mmHg

- patient is diagnosed with Acute pulmonary edema, respiratory failure and HTN
- patient is connected to ventilator



Medications :-

- Inj STEPIP 4.5gm IV : 1-1-1
- Inj STELPAN 40mg IV: 1-0-1
- Inj LASIX 40mg IV :1-1-0
- Neb SPREVENT :1-1-1
- Neb BUDACURE : 1-0-1
- Tab ONCE 10mg : 1-0-1
- Tab ECOSPIRIN AV



Day 2 (22/10/2025)

- Patient is conscious and oriented
- Vital signs :

HR : 104bpm

RR : 28bpm

Bp : 170/90mm

spO2 : 74%

- Patient was intubated ad connected to mechanical ventilated
- Regular suctioning is done through ET tube
- Chest physiotherapy is done



Medications

- Inj NORAD 8mg IV
- Inj STEPIP 4.5gm IV: 1-1-1
- Inj STELPAN 40mg IV : 1-0-1
- Neb IPRAVENT : 1-1-1
- Neb BUDACURE : 1-0-1
- Tab ECOSPIRIN AV : 0-0-1



Day 3 (23/10/2025)

- Patient is conscious
- Vital signs:
 - HR : 101 bpm
 - RR : 27 bpm
 - Bp : 140/80mmHg
 - SpO₂ : 98%
- Suctioning is done
- Chest physiotherapy is done
- Patient is connected to mechanical ventilation



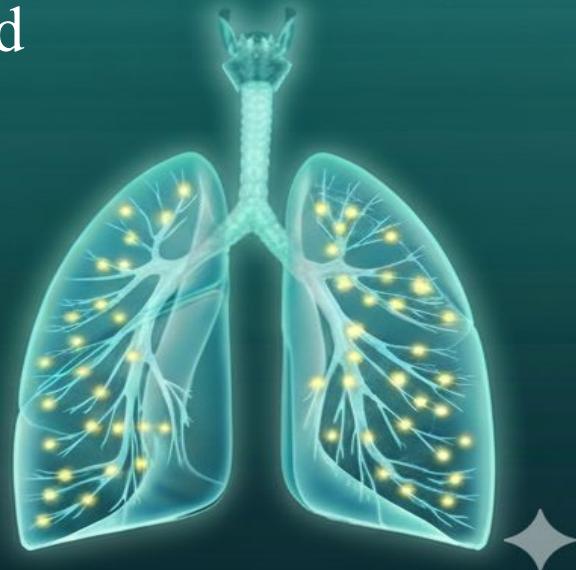
Medications

- Inj MEROZACT 1gm IV : 1-1-1
- Inj STELPAN 40mg IV : 1-0-1
- Inj VIT K - 1-0-0
- Neb IPRAVENT : 1-1-1
- Neb BUDACURE : 1-0-1
- Tab ECOSPIRIN AV : 0-0-1



Respiratory care plan

- Patient is continued with the same treatment and medications
- Patient is intubated and mechanical ventilated
- Chest physiotherapy is going on
- Regular suctioning is going on





THANK YOU
For Your Attention

