**Nursing Process Focus:**
**Patients Receiving Chlorothiazide (Diuril)**

### Assessment
Prior to administration:
- Obtain complete health history including allergies, drug history and possible drug interactions.
- Assess for presence/history of serious kidney dysfunction, hypokalemia, decreased liver function, diabetes mellitus, decreased liver function.
- Lab values for CBC, BUN, creatinine, electrolytes, uric acid, blood glucose.
- Obtain vital signs.
- Assess for peripheral edema.
- Obtain body weight.

### Potential Nursing Diagnoses
- Risk for Falls, related to orthostatic hypotension secondary to drug
- Deficient Knowledge, related to no previous experience with thiazide diuretics
- Deficient Fluid Volume, related to excessive dose of chlorothiazide
- Noncompliance (recommended medication regimen), related to unpleasant side effects, misunderstanding of need to take drug exactly as ordered

### Planning: Patient Goals and Expected Outcomes
Patient will:
- Take medication as ordered, without increasing or decreasing unless recommended by health care provider.
- Experience no side effects or adverse reactions.
- Experience increased urinary output, decreased blood pressure.
- Demonstrate knowledge of mechanisms of action of chlorothiazide.
- Demonstrate knowledge of eating potassium-rich diet or of taking potassium supplement, but not both unless specifically recommended by health care provider.

### Implementation

<table>
<thead>
<tr>
<th>Interventions and (Rationales)</th>
<th>Patient Education/Discharge Planning</th>
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<tbody>
<tr>
<td>*Obtain history of drug allergies. (Chlorothiazide is a sulfonamide, so if patient is sensitive to one sulfa drug, he/she will not be able to take it.)</td>
<td>*Instruct patient to report all allergies to the health care provider.</td>
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<tr>
<td>*Monitor renal function. (Chlorothiazide cannot be given to patient with severe renal dysfunction or anuria.)</td>
<td>*Instruct patient to monitor intake and output and report changes in urine amount to health care provider.</td>
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| *Monitor potassium levels. (Chlorothiazide decreases potassium levels; patient must be monitored closely for normal levels throughout therapy.) | Instruct patient:  
  - Regarding signs and symptoms of hypokalemia, including leg cramps, nausea, vomiting, cardiac dysrhythmias.  
  - To report symptoms to health care provider.  
  - To add potassium rich foods to diet such as citrus fruit and melons. |
| *Monitor blood sugar levels if patient is diabetic or pre-diabetic. (Chlorothiazide) | Instruct patient:  
  - To monitor blood glucose closely. |
<table>
<thead>
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<th>Event</th>
<th>Action</th>
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<td>May cause hyperglycemia and glycosuria. Patient may need dosage adjustments of hypoglycemic drugs.</td>
<td>To report consistent hyperglycemia to the health care provider.</td>
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<tr>
<td>Monitor for gout. (Patient with gout may experience hyperuricemia without symptoms, secondary to chlorothiazide’s interference with uric acid excretion.)</td>
<td>Instruct patient to report worsening of symptoms of gout to the health care provider.</td>
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<tr>
<td>Monitor intake and output. Monitor for equality between intake and output in a 24-hour period. (Excessive diuresis, or oliguria, can lead to electrolyte imbalances.)</td>
<td>Instruct patient to report either oliguria or extreme diuresis immediately.</td>
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</tbody>
</table>
| Provide safe environment. (Chlorothiazide may cause orthostatic hypotension placing patient at risk for falls.) | Teach patient/caregivers:  
  - measures to decrease falls if orthostatic hypotension occurs.  
  - to change position slowly, rise slowly. |

**Evaluation of Outcome Criteria**

Evaluate the effectiveness of drug therapy by confirming that patient goals and expected outcomes have been met (see “Planning”).