

Assessment	Nursing Diagnosis	Planning	Nursing Intervention	Rationale	Evaluation
Subjective = Ø Objective: • Restlessness • Facial grimacing • Fatigue • Peripheral cyanosis • Weak pulse • Cold and clammy skin • Palpitations • Shortness of breath • Elevated temperature Pain scale of 8/10	Acute Chest Pain Related to : myocardial ischemia resulting from coronary artery occlusion with less/restriction of blood flow to an area of the myocardium and necrosis of the myocardium	Short Term Goal: Within 1 hour of nursing interventions, the client will have improved comfort in chest, as evidenced by: • States a decrease in the rating of the chest pain. • Is able to rest, displays reduced tension, and sleeps comfortably. • Requires decrease analgesia or nitroglycerin. Long Term Goal: The client will have an improved feeling of control as evidenced by verbalizing a sense of control over present situation and future outcomes within 2 days of nursing interventions.	Independent: 1. Assess characteristics of chest pain, including location, duration, quality, intensity, presence of radiation, precipitating and alleviating factors, and as associated symptoms, have client rate pain on a scale of 1-10 and document findings in nurse's notes. 2. Obtain history of previous cardiac pain and familial history of cardiac problems. 3. Assess respirations, BP and heart rate with each episodes of chest pain. 4. Maintain bed rest during pain, with position of comfort, maintain relaxing environment to promote calmness. 5. Prepare for the administration of medications, and monitor response to drug therapy. Notify physician if pain does not abate.	1. Pain is indication of MI, assisting the client in quantifying pain may differentiate pre-existing and current pain patterns as well as identify complications. 2. This provides information that may help to differentiate current pain from previous problems and complications. 3. Respirations may be increased as a result of pain and associate anxiety. 4. To reduce oxygen consumption and demand, to reduce competing stimuli and reduces anxiety. 5. pain control is a priority, as it indicates ischemia. 6. to decrease myocardial oxygen demand and workload on the heart.	Short Term Goal: Within 1 hour of nursing intervention, the client had improved comfort in chest, as evidenced by: • States a decrease in the rating of the chest pain. • Is able to rest, displays reduced tension, and sleeps comfortably. • Requires decrease analgesia or nitroglycerin. Goal was met. Long Term Goal: The client had an improved feeling of control as evidenced by verbalizing a sense of control over present situation and future outcomes within 2 days of nursing intervention. Goal was met.

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