

Assessment	Nursing Diagnosis	Planning	Nursing Intervention	Rationale	Evaluation
<p><b>Subjective = D</b></p> <p><b>Objective:</b></p> <ul style="list-style-type: none"> <li>Restlessness</li> <li>Facial grimacing</li> <li>Fatigue</li> <li>Peripheral cyanosis</li> <li>Weak pulse</li> <li>Cold and clammy skin</li> <li>Palpitations</li> <li>Shortness of breath</li> <li>Elevated temperature</li> </ul> <p>Pain scale of 8/10</p>	<p><b>Acute Chest Pain</b></p> <p>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</p>	<p><b>Short Term Goal:</b> Within 1 hour of nursing interventions, the client will have improved comfort in chest, as evidenced by:</p> <ul style="list-style-type: none"> <li>States a decrease in the rating of the chest pain.</li> <li>Is able to rest, displays reduced tension, and sleeps comfortably.</li> <li>Requires decrease analgesia or nitroglycerin.</li> </ul> <p><b>Long Term Goal:</b> 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.</p>	<p><b>Independent:</b></p> <ol style="list-style-type: none"> <li>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.</li> <li>Obtain history of previous cardiac pain and familial history of cardiac problems.</li> <li>Assess respirations, BP and heart rate with each episodes of chest pain.</li> <li>Maintain bed rest during pain, with position of comfort, maintain relaxing environment to promote calmness.</li> <li>Prepare for the administration of medications, and monitor response to drug therapy. Notify physician if pain does not abate.</li> </ol>	<ol style="list-style-type: none"> <li>Pain is indication of MI, assisting the client in quantifying pain may differentiate pre-existing and current pain patterns as well as identify complications.</li> <li>This provides information that may help to differentiate current pain from previous problems and complications.</li> <li>Respirations may be increased as a result of pain and associate anxiety.</li> <li>To reduce oxygen consumption and demand, to reduce competing stimuli and reduces anxiety.</li> <li>pain control is a priority, as it indicates ischemia.</li> <li>to decrease myocardial oxygen demand and workload on the heart.</li> </ol>	<p><b>Short Term Goal:</b> Within 1 hour of nursing intervention, the client had improved comfort in chest, as evidenced by:</p> <ul style="list-style-type: none"> <li>States a decrease in the rating of the chest pain.</li> <li>Is able to rest, displays reduced tension, and sleeps comfortably.</li> <li>Requires decrease analgesia or nitroglycerin.</li> </ul> <p>Goal was met.</p> <p><b>Long Term Goal:</b> 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.</p> <p>Goal was met.</p>

# Nursing Care Plans Nursing Diagnosis And Intervention

**Julia Schneider**



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