MARGARET H. ROLLINS SCHOOL OF NURSING
Potential Nursing Diagnoses: Example – 2021

Problem #1 Ineffective breathing pattern
Clinical Reasoning: RR of 26, shallow breathing, chest tube

EO: A.B.'s respiratory rate will be ≤ 20 per minute during my time of care.

Ongoing Assessments:

a. Assess respiratory rate, depth, and patterns q 4°
b. Auscultate lung sounds q shift.
c. Assess pulse ox q 4°
d. Assess skin color, temperature, & capillary refill q shift.
e. Assess chest tube insertion site PRN

NI's:

1. Maintain HOB elevated 30 degrees at all times.
2. Encourage to use IS q hour.
3. Instruct to splint incision when coughing and deep breathing prn.
4. Maintain O_2 at 2 liters/minute via nasal cannula at all times.
5. Maintain chest tube at 20cm of wall suction continuously.

Problem #2 Acute Pain
Clinical Reasoning: c/o pain, grimacing, guarding

EO: A.B. will rate his pain as < 3 on 0-10 pain scale during my time of care.

Ongoing Assessments:

a. Assess pain rating using 0-10 pain scale q 4° during my shift.
b. Assess precipitating or relieving factors, quality, onset, duration, and location
c. Assess verbal and non-verbal complaints of pain q 4°.
d. Assess vital signs (BP, HR, RR) q 4°.
e. Assess patient's expected pain relief goal and preferred methods of pain relief

NI's:

1. Assist with repositioning q 2° from back to R side.
2. Instruct to splint incision with movement & deep breathing exercises.
3. Encourage diversional activities (TV, reading) q 2°.
4. Encourage patient to use PCA morphine before pain level reaches a 3 on 0-10 scale.
5. Maintain PCA morphine at prescribed settings (be specific).