

Nursing Problem Worksheet

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Anticipated Patient Problem and Goals	Relevant Assessments (Prewrite) What assessments pertain to your patient's problem? Include frequencies	Multidisciplinary Team Intervention (Prewrite) What will you do if your assessment is abnormal?
Problem: Impaired Gas Exchange Reasoning: COPD, SOB, Wheezing, persistent cough, frequent respiratory infections, fatigue Goal: By the end of my care, pt. will have a normal RR rate of 12-20, symmetrical chest rise, unlabored breaths. Goal: By the end of my care pt. will not exhibit any signs of hypoxemia.	Measure oxygen saturation levels q2hr.	Teach deep breathing and coughing techniques and implement the use of the IS, 10 breaths q1hr.
	Monitor RR, rhythm, and effort q2hr.	Position pt. in high fowlers and maintain position throughout shift.
	Auscultate breathes sound posterior & anterior q4hr.	Educate the pt. and demonstrate breathing techniques, splinting, pursed lip breathing.
	Observe signs of hypoxemia (restlessness, cyanosis, confusion) q2hr.	Maintain oxygen as prescribed.

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Goals	frequencies	
<p>Problem: Acute Pain</p> <p>Reasoning: Inflammation of the pleura (Intrapleural Inflammation), strain on chest muscles due to constant coughing, impaired pleural integrity.</p> <p>Goal: By the end of my shift, the pt. will report a decrease in pain level to a score of 3/10 or lower on the pain scale, using appropriate pain relief measures.</p> <p>Goal: By the end of my shift, the pt. will demonstrate effective breathing techniques and activities that do not exacerbate pain, allowing for adequate oxygenation and airway clearance.</p>	<p>Assess pt. pain scale of a (0-10), pain characteristics, verbal and nonverbal ques q2h.</p>	<p>Administer prescribed medications as ordered, reassess the pt's pain level after 30-60 minutes.</p>
	<p>Monitor RR and effort q2h or more frequently if the patient exhibits signs of distress.</p>	<p>Teach deep breathing/coughing, IS 10 times q1h, splinting, positioning to facilitate effective airway clearance.</p>
	<p>Assess the frequency, strength, and effectiveness of the patient's cough q2h.</p>	<p>Provide preferred liquids to encourage the pt. to stay well-hydrated, as adequate fluid intake can help thin mucus secretions and facilitate more effective coughing.</p>
	<p>Measure vital signs - HR, B/P, O2 q4h.</p>	<p>Initiate continuous monitoring of the patient's vital signs, including heart rate, blood pressure, and oxygen saturation.</p>