

Acute pain related to left pelvic injury

As evidenced by

- Constant throbbing pain in the pelvic area rated at a 6/10 on a verbal pain scale
- Blood pressure of 167/95
- Facial grimacing with any movement
- Excessively restless

Patient will have decreased pain

- Patient will have a pain level of 3/10 on a verbal scale and the throbbing would subside
- Patient will have a blood pressure within normal levels 135/85-110/80
- Facial grimacing will subside
- Restlessness will subside and patient will rest comfortably
 - By discharge

Related interventions

- Assess pain Q2HR (0800,1000,1200,1400,ect.)
 - Rationale: monitor and maintain patients pain, and monitor the effectiveness of the medication given
- Assess blood pressure @2HR (0800,1000,1200,1400,ect.)
 - Rationale monitor and maintain patient blood pressure and the effectiveness of the medication given
- Give Tylenol 650mg Q6HR for mild pain (0600,1200,1800,0000)
 - Rationale: To maintain the patient's pain at a tolerable level
- Give Tramadol Hcl 25mg Q6HR PRN for moderate pain
 - Rationale: To maintain the patient's pain at a tolerable level
- Give Lopressor 50mg BID (0900,2100)
 - Rationale: to maintain blood pressure in a normal range
- Play relaxation videos with music
 - Rationale: To distract the patient from pain by using relaxation techniques
- Implement a turning schedule Q@HR (0800,1000,1200,1400,ect.)
 - Rationale: To prevent pressure ulcers and control pain

Evaluation 01-23-2020

- Goal was met as evidenced by
 - Patient stating 0/10 pain, controlled with Tylenol
 - Blood pressure 123/64
 - The patient displays no facial grimacing
 - Patient is resting comfortably