

## NURSING CARE PLAN FOR ACUTE PERITONITIS:

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
<p><b>Subjective Data:</b></p> <ul style="list-style-type: none"> <li>- Patient reports severe abdominal pain and tenderness.</li> </ul> <p><b>Objective Data:</b></p> <ul style="list-style-type: none"> <li>- Guarding and rigidity on abdominal exam; elevated temperature; lab values indicate infection.</li> </ul>	<p><b>Acute Pain</b> related to peritoneal inflammation as evidenced by severe abdominal pain and guarding.</p>	<p><b>Short-Term:</b></p> <ul style="list-style-type: none"> <li>- Within 1 hour, reduce pain to a tolerable level (e.g., 4/10 on the pain scale).</li> </ul> <p><b>Long-Term:</b></p> <ul style="list-style-type: none"> <li>- Patient reports manageable pain and improved comfort.</li> </ul>	<p>Administer prescribed analgesics and antipyretics; use non-pharmacological comfort measures such as proper positioning.</p>	<p>Provide medications as ordered; reposition patient to relieve pressure; monitor pain levels every 30 minutes.</p>	<p>Effective pain management improves comfort and supports recovery.</p>	<p>Patient reports decreased pain; improved comfort; vital signs stabilize.</p>
<p><b>Subjective Data:</b></p> <ul style="list-style-type: none"> <li>- Patient expresses concern about the risk of systemic infection.</li> </ul> <p><b>Objective Data:</b></p> <ul style="list-style-type: none"> <li>- Laboratory results show elevated white blood cell count;</li> </ul>	<p><b>Risk for Infection</b> related to exposure of the peritoneal cavity as evidenced by fever and lab abnormalities.</p>	<p><b>Short-Term:</b></p> <ul style="list-style-type: none"> <li>- Within 24 hours, prevent progression of infection and stabilize vital signs.</li> </ul> <p><b>Long-Term:</b></p> <ul style="list-style-type: none"> <li>- Patient remains infection-free and demonstrates</li> </ul>	<p>Initiate broad-spectrum antibiotic therapy; maintain aseptic technique during all procedures; monitor temperature and lab values.</p>	<p>Administer antibiotics as prescribed; follow strict aseptic protocols; reassess lab values every 6 hours.</p>	<p>Early intervention and aseptic technique reduce the risk of systemic infection.</p>	<p>Temperature normalizes; WBC count decreases; patient shows no signs of worsening infection.</p>

patient appears febrile.		normal laboratory values.				
<b>Subjective Data:</b> - Patient is anxious about their condition and the need for possible surgery. <b>Objective Data:</b> - Patient verbalizes fear; heart rate is slightly elevated; signs of anxiety observed.	<b>Anxiety</b> related to uncertainty about the condition and potential complications as evidenced by patient reports and physiological signs.	<b>Short-Term:</b> - Within 1 day, patient reports reduced anxiety and understands the care plan. <b>Long-Term:</b> - Patient demonstrates effective coping strategies and remains informed.	Provide emotional support and clear information about the condition and treatment options; teach relaxation techniques.	Engage in one-on-one counseling; use guided imagery and deep breathing exercises; monitor anxiety levels.	Reducing anxiety supports overall recovery and helps patients adhere to treatment plans.	Patient reports decreased anxiety; heart rate stabilizes; demonstrates use of relaxation techniques.