

NURSING CARE PLAN FOR GLAUCOMA PDF

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
<p>Subjective Data: - Patient reports blurred vision and difficulty with peripheral vision.</p> <p>Objective Data: - Elevated intraocular pressure; visual field deficits noted.</p>	<p>Impaired Vision related to optic nerve damage secondary to elevated intraocular pressure as evidenced by blurred vision and visual field loss.</p>	<p>Short-Term: - Within 1 hour, patient will report improved vision clarity following medication administration.</p> <p>Long-Term: - Patient will maintain stable visual acuity and intraocular pressure with ongoing treatment.</p>	<p>Develop a plan for administering ocular hypotensive agents and monitor IOP regularly.</p>	<p>Administer prescribed eye drops; perform tonometry every 4-6 hours; document visual changes.</p>	<p>Lowering IOP reduces optic nerve damage and preserves vision.</p>	<p>Patient reports improved clarity; tonometry shows reduced IOP; visual fields remain stable.</p>
<p>Subjective Data: - Patient expresses anxiety about worsening vision and treatment side effects.</p> <p>Objective Data: - Patient</p>	<p>Ineffective Health Management related to insufficient knowledge about glaucoma and its treatment as evidenced by</p>	<p>Short-Term: - Within 24 hours, the patient will verbalize key aspects of the treatment plan.</p> <p>Long-Term: - Patient will adhere to medication and</p>	<p>Plan an education session focused on glaucoma, treatment methods, and self-care practices.</p>	<p>Conduct a teaching session; provide educational materials; encourage questions and feedback.</p>	<p>Education reduces anxiety and improves adherence to treatment.</p>	<p>Patient and family verbalize understanding; patient follows prescribed regimen; improved adherence noted in follow-up.</p>

appears anxious; vital signs are slightly elevated.	patient anxiety and inconsistent medication use.	follow-up schedules consistently.				
Subjective Data: - Patient reports occasional eye discomfort and headache. Objective Data: - Signs of ocular discomfort observed; mild headache noted.	Acute Pain related to increased intraocular pressure as evidenced by reported discomfort and headache.	Short-Term: - Within 1 hour, patient's pain will decrease from 7/10 to 3/10. Long-Term: - Patient will experience minimal pain with ongoing treatment.	Plan for pain management using prescribed analgesics and non-pharmacological methods such as warm compresses.	Administer analgesics as ordered; apply warm compresses to the eye region; reassess pain levels regularly.	Managing pain improves comfort and enhances treatment adherence.	Patient's pain score decreases; overall comfort improves; patient reports better quality of life.