

NURSING CARE PLAN FOR CHOLELITHIASIS:

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
<p>Subjective Data: - Patient reports intermittent right upper quadrant pain after meals and nausea.</p> <p>Objective Data: - Abdominal tenderness in RUQ; ultrasound confirms gallstones; patient appears anxious about the pain.</p>	<p>Acute Pain related to gallstone irritation as evidenced by patient-reported pain and abdominal tenderness.</p>	<p>Short-Term: - Within 1 hour, reduce pain to a tolerable level (e.g., 4/10 on pain scale).</p> <p>Long-Term: - Patient experiences consistent pain control and improved quality of life.</p>	<p>Administer prescribed analgesics and antispasmodics; monitor pain levels; encourage relaxation techniques.</p>	<p>Deliver medications as ordered; reassess pain every 30 minutes; document changes in pain intensity.</p>	<p>Pain relief improves patient comfort and facilitates recovery.</p>	<p>Pain scores decrease; patient reports improved comfort; vital signs stabilize.</p>
<p>Subjective Data: - Patient expresses concerns about dietary habits and potential for recurrence.</p> <p>Objective Data: - Diet history reveals high-fat</p>	<p>Deficient Knowledge regarding cholelithiasis management as evidenced by patient uncertainty about diet and self-care practices.</p>	<p>Short-Term: - Within 24 hours, patient verbalizes key dietary modifications.</p> <p>Long-Term: - Patient adheres to a low-fat, nutrient-rich diet and shows</p>	<p>Develop an education plan with a dietitian; provide written materials on low-fat dietary guidelines; encourage regular physical activity.</p>	<p>Conduct individual teaching sessions; provide brochures and dietary logs; review food diary with the patient.</p>	<p>Education empowers patients to make informed lifestyle changes that support gallbladder health.</p>	<p>Patient demonstrates understanding; dietary logs reflect adherence; follow-up labs show improvement.</p>

consumption; patient is overweight.		improved laboratory results.				
Subjective Data: - Patient appears anxious about the potential for complications and recurrence. Objective Data: - Patient exhibits signs of anxiety; reports fear of recurrent pain.	Anxiety related to potential complications and uncertainty about recovery as evidenced by patient-reported concerns and physiological signs.	Short-Term: - Within 1 day, patient reports reduced anxiety and increased understanding of the condition. Long-Term: - Patient employs effective coping strategies and adheres to the care plan.	Provide emotional support and counseling; teach relaxation techniques such as deep breathing; offer clear information about treatment options.	Engage in one-on- one counseling sessions; provide stress-reduction resources; monitor anxiety levels.	Reducing anxiety improves overall well- being and encourages adherence to treatment.	Patient reports decreased anxiety; demonstrates use of coping strategies; feedback is positive.