NURSING CARE PLAN FOR ASPIRATION PNEUMONIA:

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
Subjective Data: - Parent reports that the infant has a persistent cough and difficulty breathing. Objective Data: - Respiratory rate is elevated; oxygen saturation is 90%; wheezing heard on auscultation.	Impaired Gas Exchange related to airway inflammation and mucus accumulation as evidenced by low oxygen saturation and wheezing.	Short-Term: - Within 1 hour, increase oxygen saturation to above 92% and reduce wheezing. Long-Term: - Maintain effective gas exchange and reduce respiratory distress.	Initiate oxygen therapy; position the patient upright; monitor respiratory status closely.	Administer supplemental oxygen via nasal cannula; adjust flow rate as needed; reassess vital signs every 15 minutes.	Improving oxygenation enhances tissue perfusion and reduces respiratory effort.	Oxygen saturation increases; wheezing decreases; respiratory rate normalizes.
Subjective Data: - Patient reports fatigue and occasional chest discomfort during breathing. Objective Data: - Patient shows signs of fatigue; heart rate is slightly elevated;	Ineffective Breathing Pattern related to increased work of breathing as evidenced by rapid, shallow respirations.	Short-Term: - Within 1 hour, the patient will demonstrate a more regular breathing pattern with reduced accessory muscle use. Long-Term: - Patient achieves	Teach deep breathing and pursed-lip breathing exercises; provide verbal cues during breathing sessions.	Coach the patient through breathing exercises; encourage slow, controlled breaths; monitor changes in breathing pattern.	Effective breathing techniques lower the work of breathing and improve oxygen exchange.	Breathing becomes more regular; patient reports reduced fatigue; use of accessory muscles decreases.

minimal use of accessory muscles noted.		improved respiratory efficiency and reduced discomfort.				
Subjective Data: - Patient expresses anxiety about their breathing difficulties and the risk of complications. Objective Data: - Patient appears anxious; heart rate is elevated; patient verbalizes concerns.	Deficient Knowledge regarding the management of aspiration pneumonia as evidenced by patient anxiety and uncertainty about self-care practices.	Short-Term: - Within 24 hours, patient will verbalize key self-care strategies and understand when to seek help. Long-Term: - Patient adheres to the prescribed care plan and attends regular follow-up appointments.	Develop an education plan that covers the causes, treatment, and self-care practices for aspiration pneumonia; provide written materials and demonstrations.	Conduct one-on-one teaching sessions; distribute brochures and visual aids; schedule follow-up reviews.	Education reduces anxiety and improves adherence to care plans.	Patient demonstrates increased understanding; anxiety decreases; follow-up confirms consistent care.