NURSING CARE PLAN FOR CONGESTIVE HEART FAILURE

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
Subjective Data: - Patient reports fatigue and shortness of breath. Objective Data: - Blood pressure: 90/60 mmHg; heart rate: 110 bpm; edema in legs; weight gain noted.	Decreased Cardiac Output related to weakened heart muscle function as evidenced by fatigue, low blood pressure, and edema.	Short-Term: - Within 1 hour, patient's vital signs improve and symptoms of fatigue decrease. Long-Term: - Patient maintains stable vital signs and experiences improved energy levels.	Plan to administer diuretics and monitor fluid intake and output. Schedule daily weight checks and vital sign monitoring.	Administer diuretics as ordered; check vital signs every 30 minutes; record daily weight.	Diuretics reduce fluid overload, which improves heart function and reduces edema.	Vital signs stabilize; weight remains consistent; patient reports less fatigue and improved activity.
Subjective Data: - Patient reports chest discomfort and pain. Objective Data:	Acute Pain related to chest discomfort due to fluid overload as evidenced by patient's report	Short-Term: - Within 1 hour, the patient's pain decreases to 4/10 on the pain scale. Long-Term: - Patient reports	Plan to administer prescribed analgesics and use non-pharmacological methods like rest and proper positioning.	Administer pain medication; position patient comfortably in a semi-Fowler's position; reassess	Pain management improves comfort, reduces stress on the heart,	Patient's pain score decreases; patient appears more comfortable; no further reports of severe pain.

- Patient exhibits chest pain rated 7/10 on the pain scale; slightly elevated temperature.	and physical findings.	minimal pain and improved overall comfort.		pain every 30 minutes.	and facilitates recovery.	
Subjective Data: - Patient expresses uncertainty about self-care practices. Objective Data: - Patient appears anxious and asks questions about diet and medication use.	Deficient Knowledge regarding condition management and the importance of a low-sodium diet and medication adherence.	Short-Term: - Within 24 hours, the patient will list at least three key self-care strategies. Long-Term: - Patient will adhere to a low- sodium diet and medication regimen consistently.	Develop an education plan that includes written materials and verbal instructions about CHF management.	Conduct a teaching session using simple language; provide a handout on selfcare; encourage questions.	Educating the patient empowers them to manage their condition and improves compliance with treatment.	Patient demonstrates understanding by listing self-care strategies; family reports improved adherence; follow-up assessments confirm consistency in self-care.