NURSING CARE PLAN FOR TACHYCARDIA:

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
Subjective Data: - Patient reports palpitations and chest discomfort during activity. Objective Data: - Heart rate is 110 bpm; blood pressure is 140/90 mmHg; ECG shows irregular rhythm.	Decreased Cardiac Output related to abnormal heart rate as evidenced by palpitations and irregular ECG.	Short-Term: - Within 1 hour, reduce heart rate to below 100 bpm and relieve chest discomfort. Long-Term: - Patient maintains a stable, regular heart rhythm with improved cardiac output.	Administer prescribed beta-blockers and antiarrhythmic medications; monitor ECG continuously.	Deliver medications as ordered; reassess vital signs and ECG every 15-30 minutes; document changes.	Beta-blockers lower heart rate and antiarrhythmics stabilize cardiac rhythm, improving output.	ECG normalizes; heart rate decreases; patient reports reduced chest discomfort.
Subjective Data: - Patient expresses anxiety about potential heart complications. Objective Data: - Patient appears anxious; heart rate remains slightly elevated.	Anxiety related to fear of cardiac complications as evidenced by patient reports and physiological signs.	Short-Term: - Within 1 hour, patient reports reduced anxiety. Long-Term: - Patient demonstrates effective coping strategies and	Provide emotional support and teach relaxation techniques such as deep breathing.	Conduct counseling sessions; use guided imagery; monitor anxiety levels; provide reassurance.	Reducing anxiety decreases sympathetic stimulation and supports cardiac stability.	Patient reports decreased anxiety; heart rate stabilizes; patient uses relaxation techniques effectively.

Subjective Data: - Patient is uncertain about lifestyle changes necessary to manage tachycardia. Objective Data: - Patient asks questions about diet and exercise; expresses difficulty adhering to recommendations.	Deficient Knowledge regarding the management of tachycardia as evidenced by patient uncertainty and non-adherence to lifestyle modifications.	maintains a calm state. Short-Term: - Within 24 hours, patient verbalizes understanding of lifestyle modifications. Long-Term: - Patient adheres to a hearthealthy lifestyle and follows care instructions.	Develop a comprehensive education plan covering dietary changes, exercise, and stress reduction.	Provide individual teaching sessions; distribute written materials and visual aids; schedule regular follow-ups.	Education empowers patients to manage their condition and improves adherence.	Patient verbalizes understanding; food diary and activity logs reflect adherence; follow-up assessments show progress.			
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