NURSING CARE PLAN FOR CHOLECYSTECTOMY

Nursing Diagnosis	Patient Goals/Expected Outcomes	Assessment Data	Nursing Interventions	Rationale	Evaluation	Documentation/Follow- Up
Risk for Infection	Keep the surgical site free from infection	Redness and slight swelling at incision	Monitor incision, change dressings as per protocol, and administer prophylactic antibiotics if ordered	Prevents infection and promotes proper healing	No signs of infection observed; dressing remains clean	Document wound status every shift and update care plan as needed
Acute Pain	Reduce pain to a manageable level (≤ 3/10)	Patient reports pain score of 7/10	Administer analgesics as prescribed; use non- pharmacological methods like ice packs and relaxation techniques	Reduces discomfort and facilitates recovery	Patient reports decreased pain levels; shows improved comfort	Record pain assessments and medication administration times
Impaired Physical Mobility	Enhance mobility and independence	Limited movement due to postoperative pain	Assist with gradual mobilization and encourage gentle exercises	Promotes circulation and prevents complications	Improved mobility and reduced stiffness observed	Document therapy sessions and patient progress

Risk for Bleeding	Maintain hemodynamic stability; no bleeding	Slight oozing at the incision observed	Monitor vital signs closely; apply pressure dressings; notify physician if bleeding increases	Ensures early detection and management of bleeding	Stable vital signs; controlled bleeding	Record bleeding observations and update treatment as necessary
Knowledge Deficit	Patient will understand postoperative care instructions	Patient expresses uncertainty about dietary restrictions and self-care	Provide clear, written instructions; educate about dietary modifications and activity restrictions	Empowers patient to participate in recovery and prevents complications	Patient verbalizes understanding and follows instructions	Document educational sessions and patient's comprehension
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