EPIGLOTTITIS NURSING CARE PLANS

Nursing Diagnosis	Patient Goals/Expected Outcomes	Assessment Data	Nursing Interventions	Rationale	Evaluation	Documentation/Follow- Up
Ineffective Airway Clearance	Patient will maintain a patent airway with minimal stridor within 24 hours	Presence of stridor, increased work of breathing, drooling	Administer nebulized epinephrine; position patient upright; monitor airway closely	Reduces airway inflammation and opens the airway	Stridor reduced; airway remains patent	Document airway assessments and medication effects
Impaired Breathing Pattern	Stabilize respiratory rate and oxygen saturation within 24-48 hours	Elevated respiratory rate; low oxygen saturation; accessory muscle use	Provide supplemental oxygen; monitor oxygen saturation; adjust positioning as needed	Enhances oxygenation and reduces respiratory distress	Respiratory rate and oxygen levels return to baseline	Record vital signs and respiratory assessments
Acute Pain	Patient will report pain ≤3/10 within 24 hours	Reports of throat pain and discomfort	Administer prescribed analgesics; offer non-pharmacologic pain relief (e.g., distraction techniques)	Alleviates pain and improves overall comfort	Patient reports reduced pain; improved comfort	Document pain assessments and intervention outcomes

Anxiety	Patient and caregivers will verbalize reduced anxiety within 24 hours	Agitation; expressions of fear about breathing difficulties	Provide reassurance; explain procedures clearly; offer emotional support and relaxation techniques	Reduces stress and promotes a calm environment	Patient and caregivers show signs of reduced anxiety	Document emotional support and education sessions
Knowledge Deficit	Caregivers will understand the emergency care plan and necessary precautions within 24 hours	Caregivers express uncertainty about treatment and emergency signs	Distribute written materials; conduct one-on-one teaching sessions; answer questions thoroughly	Ensures informed participation in care and adherence to guidelines	Caregivers demonstrate understanding in follow-up discussions	Record education sessions and verify comprehension
Risk for Injury	Prevent injury by maintaining a safe environment during respiratory distress	Signs of hypoxia; potential for falls during agitation	Implement fall precautions; ensure a safe, calm environment; monitor closely during interventions	Prevents complications associated with hypoxia and agitation	No injury occurs; patient remains safe throughout treatment	Document safety measures and any incident reports