## Nursing Care Plan for Impaired Urinary Elimination

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
Subjective Data: - The patient reports involuntary urine leakage and discomfort. Objective Data: - Observed urine leakage and skin redness.	Impaired Urinary Elimination (Incontinence) related to weakened pelvic muscles as evidenced by urine leakage and skin irritation.	Short-Term: - Within 48 hours, the patient will reduce urine leakage episodes by 30%. Long-Term: - The patient will achieve controlled bladder function and maintain skin integrity.	Educate on bladder training and pelvic floor exercises; apply barrier creams for skin protection.	Conduct daily bladder training sessions; demonstrate Kegel exercises; monitor skin condition.	Strengthening pelvic muscles and proper skin care reduces leakage and prevents infection.	The patient shows fewer leakage episodes and improved skin condition as noted in daily assessments.
Subjective Data: - The patient experiences difficulty voiding and a feeling of incomplete emptying. Objective	Impaired Urinary Elimination (Retention) related to bladder outlet obstruction as evidenced by difficulty voiding and abdominal discomfort.	Short-Term: - Within 24 hours, the patient will use double voiding techniques to empty the bladder effectively. Long-Term: - The patient will report decreased	Teach double voiding techniques and, if necessary, use intermittent catheterization per protocol; review fluid intake.	Instruct the patient on voiding techniques; schedule catheterization if needed; document voiding patterns.	Proper voiding methods ensure complete bladder emptying and reduce discomfort.	The patient reports improved voiding efficiency and decreased abdominal discomfort, as documented in the voiding diary.

Data:	abdominal
- Palpable	discomfort and
bladder and	achieve regular
lower	voiding.
abdominal	
discomfort.	

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