

NURSING CARE PLAN

ASSESSMENT	DIAGNOSIS	INFERENCE	PLANNING	INTERVENTION	RATIONALE	EVALUATION
<p>Subjective:</p> <p>“Nilalagnat ang anak ko” as verbalized by the mother.</p> <p>Objective:</p> <ul style="list-style-type: none"> • Flushed skin, warm to touch. • Increased respiratory rate. • V/S taken as follows: <p>T: 37.8 P: 110 R: 45</p>	<ul style="list-style-type: none"> • Hyperthermia related to infectious process and dehydration. 	<ul style="list-style-type: none"> • Tuberculous meningitis is the most severe form of tuberculosis. It causes severe neurologic deficits or death in more than half of cases. Tuberculois meningitis begins insidiously with a gradual fluctuating fever, fatigue, weight loss, behavior changes, headache, and vomiting. This early phase is followed by neurologic deficits, loss of consciousness, or convulsions. A dense gelatinous exudate (outpouring) forms and envelops the brain arteries and cranial nerves. It creates a bottleneck in the 	<ul style="list-style-type: none"> • After 4 hrs. Of nursing interventions , the client will maintain core temperature within normal range. 	<p>Independent:</p> <ul style="list-style-type: none"> • Monitor heart rate and rhythm. • Record all sources of fluid loss such as urine, vomiting and diarrhea. • Promote surface cooling by means of tepid sponge bath. • Wrap extremities with cotton blankets. • Provide supplemental oxygen. • Administer replacement fluids and electrolytes. • Maintain bed rest. 	<ul style="list-style-type: none"> • Dysrhythmias and ECG changes are common due to electrolyte imbalance and dehydration and direct effect of hyperthermia on blood and cardiac tissues. • To monitor or potentiates fluid and electrolyte loses. • To decrease temperature by means through evaporation and conduction. • To minimize shivering. • To offset increased oxygen demands and consumption. • To support circulating volume and tissue perfusion. • To reduce metabolic demands and 	<ul style="list-style-type: none"> • After 4 hrs. Of nursing interventions, the client was able maintain core temperature within normal range.

flow of the cerebrospinal fluid, which leads to hydrocephalus.

- Provide high calorie diet, tube feedings, or parenteral nutrition.
- Administer antipyretics orally or rectally as prescribed by the physician.

oxygen consumption.

- To increased metabolic demands.
- To facilitate fast recovery.

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