

# (CELIAC DISEASE) NURSING CARE PLAN

## Medical Diagnosis: Celiac Disease

Subjective Data:	Nursing Intervention (ADPIE)	Rationale
<ul style="list-style-type: none"> <li>• Abdominal pain</li> <li>• Poor appetite</li> <li>• Irritability</li> <li>• Headaches</li> <li>• Symptoms reported to arise or worsen after consuming gluten</li> </ul>	Assess mouth and skin	<p>Oral ulcerations and sores may be present. Teeth may have areas of discoloration or patches of thinning enamel, often caused by nutritional deficiencies and chronic vomiting. An itchy, blistering rash may occur on the elbows, knees, and buttocks in severe cases called dermatitis herpetiformis.</p>
	Assess abdomen	<p>Look for bloating. Listen for (hyperactive) bowel sounds. Feel/percuss for fluid, fullness or pain, note if constipation is present.</p>
	Obtain history from parents; symptoms, frequency, known triggers; family history	<p>Celiac disease is thought to be hereditary, so there may be other family members with the same disease. Note if any family members have developed complications such as diabetes or epilepsy.</p>
<b>Objective Data:</b> <ul style="list-style-type: none"> <li>• Vomiting</li> <li>• Chronic diarrhea</li> <li>• Muscle wasting</li> <li>• Rash (dermatitis herpetiformis)</li> <li>• Short stature</li> <li>• Delayed puberty</li> <li>• Learning disabilities</li> <li>• Lack of muscle coordination</li> <li>• Seizures</li> </ul>	Monitor labs and diagnostic tests	<p>Blood tests may be run to determine the presence of antibodies for celiac disease or genetic testing</p>
	Assess for growth and developmental milestones	<p>Children with celiac often have delays in meeting developmental milestones, especially if diagnosed later in childhood. Patients may have slow or stunted growth due to malabsorption issues. Patients may have previously been treated for failure to thrive. Patients may have delays in puberty</p>

# (CELIAC DISEASE) NURSING CARE PLAN

	Nursing Intervention (ADPIE)	Rationale
	Address vomiting and/or diarrhea as appropriate	Excessive vomiting and diarrhea can cause severe fluid & electrolyte imbalances and should be addressed as appropriate to prevent long-term complications or circulatory collapse
	Administer medications and supplements as required	Calcium and vitamin supplements may be given orally or by injection for better absorption Provide nutritional education for patient and parent  Help them to understand how to read food labels. Provide education regarding possible trigger foods. Recommend keeping a diet log to help determine triggers to avoid. Gluten may also be found in hygiene products and children's modeling clay.