(CHILDHOOD ASTHMA) NURSING CARE PLAN

| Medical Diagnosis: Childhood Asthma | | |
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| Subjective Data: | Nursing Intervention (ADPIE) | Rationale |
| Tightness or pain in the chest Symptoms that are worse at night Frequent headaches Feeling weak or tired (especially later into an asthma attack) | Assess respiratory status | Get a baseline to determine effectiveness of interventions and course of treatment. During attacks, patient will have tachypnea, wheezing and labored breathing, nasal flaring and/or retractions |
| | Position upright | Patients will need to sit upright to promote lung expansion and make air flow easier. Patients may often be found in the tripod position. |
| | Administer medications via nebulizer | Bronchodilators and corticosteroids can be helpful in reducing inflammation and swelling that makes breathing difficult. A nebulizer works well to deliver an adequate amount of medication into the lungs. |
| Objective Data: • Wheezing • Cough • Bronchospasms • Tachypnea • Tachycardia • Retractions • Dark circles under the eyes • Tripod positioning | Assess patient's level of anxiety and provide relaxation techniques | Being unable to breathe causes anxiety which, in turn, causes even more constriction of the airways. Help relax. |
| | Educate patient and parents / caregivers on triggers and on how and when to use medications and rescue inhalers: Create an asthma action plan, instruct on use of peak flow meter, learn how to identify asthma exacerbation | Demonstrate use of inhaler with spacer for children over 5 years old. |



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