

# Activity Intolerance Nursing Care Plan

## Patient Information

Name:

Age:

Medical Diagnosis:

## Assessment

- **Baseline Activity Level:**
- **Underlying Causes:**

## Nursing Diagnosis

- **Impaired Physical Mobility related to:**

## Goals and Expected Outcomes

- **Short-Term Goal (1 week):**
- **Long-Term Goal (4 weeks):**

## Interventions

- **Therapeutic Exercises:**
- **Mobility Assistance:**
- **Pain Management:**
- **Patient Education:**

## **Evaluation**

- **Assessment of Progress:**
  
- **Goal Attainment:**

## **Patient Education**

- **Self-Management Strategies:**
  
- **Signs of Deterioration:**

## **Documentation**

- **Regular Charting:**

## **Review and Collaboration**

- **Team Review:**
  
- **Collaboration:**