

Decreased Cardiac Output Nursing Care Plan

Patient Information

Full Name: _____

Date of Birth: ____ / ____ / _____

Gender: _____

Patient ID: _____

Contact Number: _____

Email Address: _____

Assessment

Assessment	Rationale	Notes/Referral
Vital Signs:	Continuous monitoring of heart rate and blood pressure is crucial. Initially, increased heart rate and blood pressure might compensate for decreased output. Later, blood pressure may drop, leading to hypotension.	
Respiratory Assessment:	Observing breath sounds, rate, pattern, and oxygen saturation is essential. Reduced cardiac output can induce shortness of breath, abnormal breath sounds like crackles, and compromised oxygen levels.	
Cardiac Rhythm and Sounds:	Regular assessment of heart rhythm and sounds is vital. Reduced output can lead to arrhythmias like atrial fibrillation or vice versa. Changes in heart sounds may indicate heart failure.	
Peripheral Indicators:	Checking peripheral pulses provides insight into tissue perfusion. Decreased or weak pulses can signify poor perfusion due to decreased cardiac output.	

Skin Assessment:	Evaluating skin color, temperature, and moisture helps detect poor tissue perfusion. Cool, clammy, or pale skin indicates decreased oxygen delivery to tissues.	
Mental Status Examination:	Altered mental status might manifest due to decreased oxygenation. Confusion can be an indicator of reduced cardiac output affecting cerebral perfusion.	
Laboratory and Imaging Studies:	Analyzing lab results and imaging studies aids in identifying underlying causes contributing to low cardiac output.	
Fluid Monitoring:	Close monitoring of weight, intake, and output is crucial. Fluid retention can exacerbate symptoms related to decreased cardiac output.	
Activity Level Monitoring:	Patients might experience increased fatigue due to reduced cardiac output. Monitoring activity levels helps manage energy expenditure and fatigue.	

Interventions

Intervention	Rationale	Notes/Assessment
Medication Management:	<p>Inotropes: These medications (e.g., dobutamine) increase myocardial contractility, improving cardiac output.</p> <p>Vasopressors: Drugs like norepinephrine can elevate blood pressure, supporting cardiac output by enhancing peripheral vascular resistance.</p>	
Oxygen Therapy:	Supplemental Oxygen: Ensures adequate oxygenation, compensating for reduced oxygen delivery due to decreased cardiac output.	

<p>Fluid Management:</p>	<p>Diuretics: Reduce fluid retention, alleviating the workload on the heart and improving cardiac function.</p> <p>Fluid Restriction: Prevents excessive fluid accumulation, aiding in reducing preload on the heart.</p>	
<p>Monitoring and Supportive Measures:</p>	<p>Hemodynamic Monitoring: Using tools like central venous catheters or pulmonary artery catheters to assess cardiac function and guide interventions.</p> <p>Continuous ECG Monitoring: Identifying and managing arrhythmias that can contribute to decreased cardiac output.</p> <p>Close Observation: Regular assessment of vital signs, peripheral perfusion, mental status, and oxygenation to monitor changes in the patient's condition.</p>	
<p>Treatment of Underlying Causes:</p>	<p>Addressing Coronary Artery Disease: Revascularization procedures (angioplasty, stenting, bypass surgery) to improve blood flow to the heart.</p> <p>Managing Valve Diseases: Surgical repair or replacement of damaged heart valves to optimize cardiac output.</p>	
<p>Lifestyle Modifications:</p>	<p>Dietary Changes: Reducing sodium intake to manage fluid retention and maintaining a heart-healthy diet.</p> <p>Exercise Programs: Supervised physical activity tailored to the patient's condition to improve cardiovascular fitness.</p>	

Patient Education:	Medication Adherence: Educate patients about prescribed medications, their importance, and potential side effects. Symptom Recognition: Teaching patients to recognize symptoms of worsening cardiac function and when to seek immediate medical attention. Self-Care Management: Guidance on managing fluid intake, diet, activity levels, and recognizing signs of fluid overload or exacerbation of symptoms.	
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Physician's Notes and Recommendations

Physician's Signature:

Date: