

Pancreatitis Nursing Care Plan

Patient Information	
Patient Name	
Date of Birth	
Gender	
Patient ID	
Admission Date	
Contact Information	
Emergency Contact	

Medical History & Related Questions	
Question	
Previous history of pancreatitis?	
History of alcohol consumption?	
Family history of pancreatic diseases?	
Any known allergies?	
Current medications?	
Recent surgeries or medical procedures?	

Pancreatitis Nursing Care Plan	
Care Aspect	Plan Details
Pain Management	
Nutritional Support	
Fluid and Electrolyte Balance	
Monitoring Vital Signs	
Medication Administration	
Patient Education	

Follow-up and Referrals	
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Doctor's Signature		
Signature	Name of Doctor	Date
		