Preeclampsia Nursing Care Plan

Patient information	
Name:	Age:
Medical History:	
Pregnancy Details (Gestational Age, etc.):	
Current Medications:	
Assessment	
Blood Pressure Readings:	
Presence of Proteinuria:	
Symptoms (e.g., headache, blurred vision, abdominal pain):	
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Fetal Assessment (if applicable):	
Edema Assessment:	
Reflexes (e.g., deep tendon reflexes):	
Tienexes (e.g., deep tendon renexes).	
Nursing Diagnosis	
Risk for Decreased Cardiac Output related to:	
Risk for Fetal Injury related to:	
Anxiety related to:	
Dianning	
Planning	

- Goals
 - Short-term Goal:
 - Long-term Goal:

• Specific Objectives

Mon	itoring
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- Blood Pressure Monitoring:
- Urine Protein Monitoring:
- Fetal Monitoring:

Positioning

• Left Lateral Position:

Seizure Precautions

- Magnesium Sulfate Administration:
- Observation for Signs of Eclampsia:

• Fluid Management

- IV Fluids:
- Oral Fluids:

• Patient Education

• Disease Process:

Dietary Recommendations:	
Evaluation	
Response to Interventions:	
Blood Pressure Control:	
• Fetal Well-being:	
Additional Natao	
Additional Notes	

• Signs of Worsening Condition: