

Pulmonary Embolism Nursing Care Plan

Patient Information

Full Name: _____

Date of Birth: ____ / ____ / _____

Gender: _____

Patient ID: _____

Contact Number: _____

Email Address: _____

ASSESSMENT

Medical History:

- Document patient's history, including any previous instances of deep vein thrombosis (DVT), PE, surgeries, prolonged immobilization, or known clotting disorders.
- Risk Factors: Note any risk factors for PE, such as smoking, obesity, use of oral contraceptives, recent surgeries, or a family history of clotting disorders.

Notes:

Physical Assessment:

- Look for signs of DVT, such as swelling, pain, redness in the legs.
- Assess for symptoms of PE like sudden shortness of breath, chest pain, cough (possibly with blood), rapid heart rate.
- Vital Signs: Monitor blood pressure, heart rate, oxygen saturation, and respiratory rate for abnormalities.
- Cardiopulmonary Assessment: Assess lung sounds and heart sounds, noting any abnormalities or signs of strain.

Notes:

DIAGNOSIS

Primary Diagnosis: Pulmonary Embolism

- Signs of DVT:** Presence of symptoms indicating deep vein thrombosis.
- Symptoms Consistent with PE:** Shortness of breath, chest pain, cough, etc.
- Risk Factor Presence:** Identification of one or more risk factors for PE.
- Diagnostic Confirmations:** Results from imaging tests (like CT pulmonary angiography) confirming PE.

Secondary Diagnoses:

- Impaired Gas Exchange:** Assess and monitor for impaired gas exchange due to obstruction of pulmonary blood flow.
- Acute Pain:** Evaluate for chest pain associated with PE.
- Risk for Decreased Cardiac Output:** Monitor for signs of strain on the heart, such as tachycardia or hypotension.
- Anxiety:** Assess for anxiety related to the diagnosis, symptoms, and treatment.
- Knowledge Deficit:** Evaluate the patient's understanding of their condition and its management.
- Risk for Bleeding:** In cases where anticoagulant therapy is initiated, assess for any signs of bleeding.
- Mobility Issues:** Assess for limitations in mobility due to pain or fear of causing another PE event.

PLANNING

Goals of care

- Stabilize Cardiovascular and Respiratory Status:** Ensure patient's heart and lung functions are stable.
- Prevent Recurrence of Pulmonary Embolism:** Implement strategies to prevent further clot formation.
- Manage Pain and Discomfort:** Provide effective pain management strategies.
- Improve Oxygenation and Gas Exchange:** Ensure adequate oxygenation and ventilation.
- Educate on Disease Process and Self-Care:** Help patient understand their condition and how to manage it.
- Promote Physical Mobility:** Encourage safe physical activity to prevent DVT.
- Monitor for Complications:** Regularly assess for signs of bleeding, especially in patients on anticoagulation therapy.
- Psychological Support:** Address anxiety and emotional concerns related to PE.

INTERVENTIONS

Intervention	Example	Notes and Referrals
Anticoagulation Therapy	Administer prescribed anticoagulants (e.g., warfarin, heparin) to prevent further clotting.	
Pain Management	Provide analgesics as prescribed for chest pain relief.	
Oxygen Therapy	Administer supplemental oxygen to maintain adequate oxygenation.	
Mobility Enhancement	Encourage and assist with regular, gentle physical activities to prevent DVT.	
Patient Education	Educate about the signs of PE, importance of medication adherence, and lifestyle changes.	
Psychological Support	Offer psychological support through counseling or referral to mental health services.	
Monitoring for Complications	Regularly assess for signs of bleeding, especially in patients on anticoagulation therapy.	
Follow-up and Coordination of Care	Schedule regular follow-up appointments and coordinate with other healthcare providers.	

EVALUATION

- Regular Respiratory Assessment:** Reassess the patient's respiratory status, including breath sounds and oxygen saturation.
- Medication Response Monitoring:** Evaluate the patient's response to anticoagulants and other medications.
- Recovery Progress Tracking:** Monitor overall recovery progress, noting improvements or any complications.
- Vital Signs Monitoring:** Regularly check vital signs such as blood pressure, heart rate, and respiratory rate.
- Symptom Monitoring:** Continuously observe for new or worsening symptoms.

- Laboratory Test Review:** Review results of blood tests, including coagulation profiles.
- Imaging Follow-up:** If applicable, schedule and review follow-up imaging studies.
- Patient Feedback:** Gather feedback from the patient regarding symptoms, side effects, and general well-being.

Follow-up:

- Follow-up Date:** ____ / ____ / _____
- Long-term Monitoring Plan:** Establish a plan for long-term monitoring and management of pulmonary embolism.

Nurse's Signature: _____ **Date:** ____ / ____ / _____

Physician's Notes and Recommendations

Physician's Signature: _____ **Date:** ____ / ____ / _____

Patient Acknowledgment

I have reviewed the Pulmonary Embolism Nursing Care Plan and understand the information provided.

Patient's Signature: _____ **Date:** ____ / ____ / _____