

**OUR LADY'S CHILDREN'S HOSPITAL, CRUMLIN**  
**Nursing care plan 2**  
**Ineffective Breathing**

(All care plans must be used in conjunction with care plan 1)

Care plan 2		Ineffective Breathing	Issue date: November 2015
Problem		Goals	Review date: November 2018
<input type="checkbox"/> Has ineffective breathing pattern <input type="checkbox"/> Is susceptible to deterioration of their respiratory pattern  Related to..... .....		1. Breathing will be supported 2. Observations 3. Intravenous antibiotics 4. Pain needs supported	
Commenced date, time, signature & grade	No.	Nursing Intervention	Discontinue date, time, signature & grade
	<b>1.</b>	<b>Respiratory Support</b>	
		<ul style="list-style-type: none"> <li>Nurse upright/well supported with pillows, use an infant seat if necessary</li> <li>Monitor baseline respiratory status, continue monitoring as condition requires _____ _____</li> </ul> +/- <ul style="list-style-type: none"> <li>Administer oxygen as prescribed via humidifier, report and record effect of same _____ _____</li> <li>Administer nebulised medications as prescribed, report and record effect of same _____ _____</li> <li>Sputum samples as ordered</li> <li>Administer inhalers as prescribed, monitor effect</li> <li>Physiotherapy as ordered</li> <li>Replace oxygen equipment as per Guidelines</li> </ul>	
	<b>2.</b>	<b>Observations</b>	
		<ul style="list-style-type: none"> <li>Record baseline observations, temperature, pulse, respirations, blood pressure, and oxygen saturations. Frequency as condition dictates as requested _____</li> <li>Use <b>PEWs to detail observations and adhere to guidance</b></li> <li>Pyrexia. Use pharmacological and non-pharmacological means of reducing temperature               <ol style="list-style-type: none"> <li>Nurse in a well ventilated room</li> <li>Administer anti pyretics as prescribed</li> <li>Encourage cool drinks</li> <li>Remove excess clothing/blankets</li> </ol> </li> </ul>	

Updated November 2015

Patient Name.....

HCRN.....

Ward.....

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	<b>3.</b>	<b>Intravenous Antibiotics</b>	
		<ul style="list-style-type: none"> <li>• Administer intravenous antibiotics as prescribed as per Medication Policy _____</li> <li>• Monitor Intravenous site for redness, pain and swelling as per IV policy, report and record.</li> <li>• Monitor condition for response to antibiotic therapy report and record.</li> <li>• +/- Administer oral antibiotics as prescribed _____</li> <li>• Monitor patient receiving oral medication</li> </ul>	
	<b>4.</b>	<b>Pain</b>	
		<ul style="list-style-type: none"> <li>• Assess pain score on admission as per pain assessment guidelines, OLCCHC.</li> <li>• Administer analgesia as required and monitor and record effect of same.</li> </ul> Paracetamol/Ibuprofen/Codeine _____ _____ _____ _____	
		<b>Any other needs</b>	