



Concept of writing in nursing Part 3 - Nursing care plan writing related activities



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Learning Objectives

- **Define the purpose and importance of Nursing Care Plans.**
- **Understand the link between the Nursing Process (ADPIE) and NCPs.**
- **Identify the key components of an NCP.**
- **Learn how to write NANDA-I Nursing Diagnoses (PES format).**
- **Practice writing SMART Goals/Outcomes.**
- **Develop appropriate Interventions with Rationales.**
- **Apply these skills through a case study activity.**



Bridging the Gap: Notes & Plans

**Assessment
Data / Nurses'
Notes**

**Document
assessments,
actions, and
responses (What
happened)**



**Nursing Care
Plan**

**Use assessment
data to plan future
care (What will
happen).**

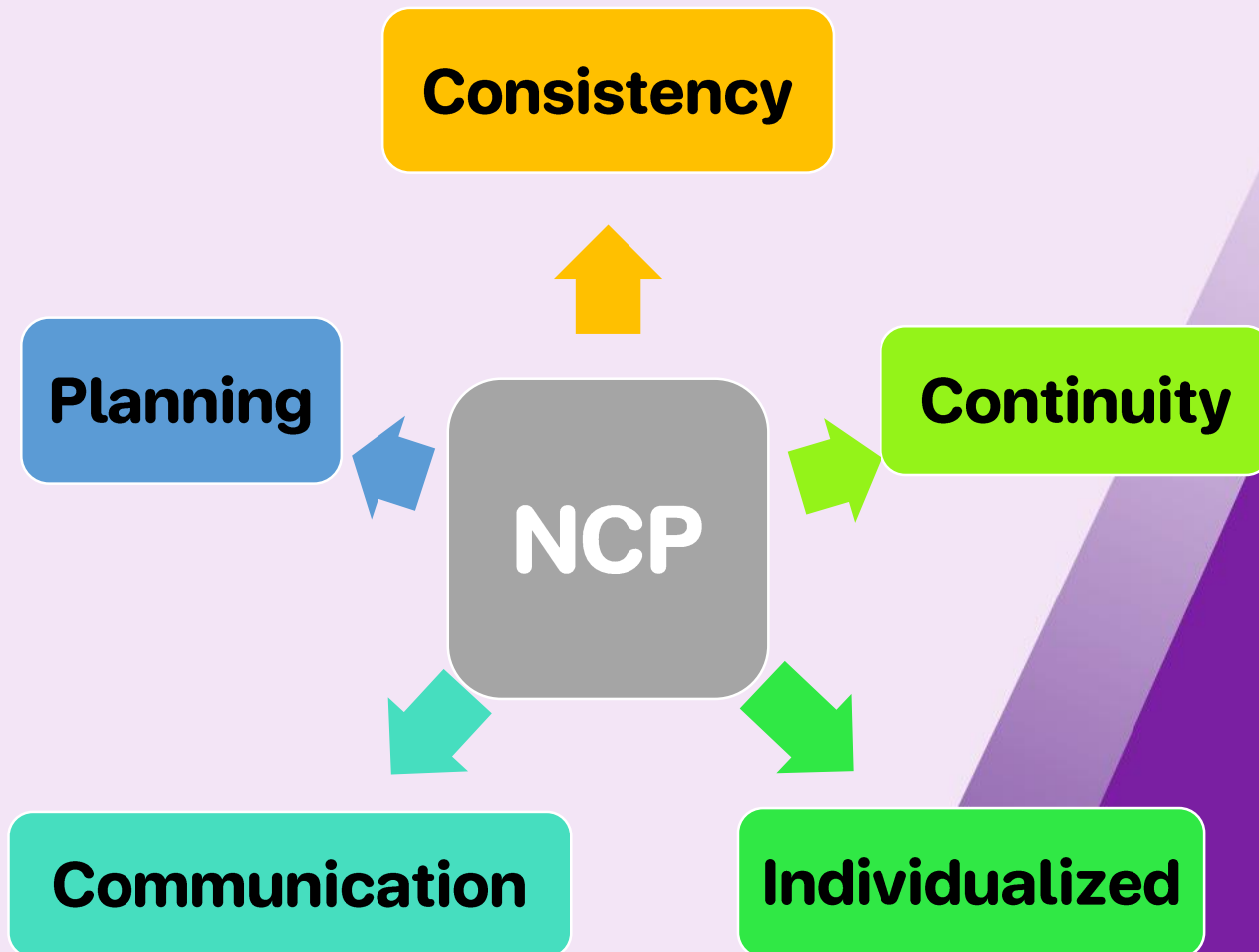


**Patient Care /
Interventions**

NCPs: guide our actions and provide a roadmap for patient care



Defining the NCP





The **ADPIE** Connection

- **Assessment -> *Data for the NCP***
- **Diagnosis -> *The 'Problem' in the NCP***
- **Planning -> *Goals & Interventions in the NCP***
- **Implementation -> *Performing the NCP Interventions***
- **Evaluation -> *Checking the NCP Goal Achievement***



Anatomy of a Care Plan





Subjective (S)

- What the patient says.
- e.g., "I feel so short of breath."

Objective (O)

- What you observe/measure.
- e.g., RR 30/min, SpO2 90% on RA, uses accessory muscles.

The Foundation: Assessment Data

This data provides the
EVIDENCE for your diagnosis.



Naming the Problem: Nursing Diagnosis

- **A clinical judgment** about patient responses to health problems/life processes.
- **Different** from a Medical Diagnosis (e.g., Pneumonia vs. Ineffective Airway Clearance).
- We often use **NANDA-I** (North American Nursing Diagnosis Association – International) terminology.
- Common format: **PES**.



The PES Format

P – Problem

- The NANDA-I label. (What's the issue?)
- e.g., Ineffective Airway Clearance

E – Etiology

- The "Related to" (R/T) factor. (What's causing it?)
- e.g., related to excessive mucus production and bronchospasm

S – Signs/Symptoms

- The "As Evidenced By" (AEB) data. (How do you know?)
- e.g., as evidenced by SpO2 90%, RR 30, audible wheezing, patient states "I can't cough this up."



Activity 1: Find the Diagnosis!

- **Data:** A 70-year-old patient eats only 30% of meals, states "I have no appetite," has lost 3 kg in 1 week. skin is dry, turgor is poor.
- **Task:** Using NANDA-I, write a *possible* PES statement.
- **Hint NANDA Labels:** *Imbalanced Nutrition: Less Than Body Requirements, Deficient Fluid Volume.*



Setting the Target: **SMART** Goals

- What do we want the patient to achieve?
- Goals should be SMART:
 - **Specific:** Clear and focused.
 - **Measurable:** How will you know it's met?
 - **Achievable:** Realistic for the patient.
 - **Relevant:** Linked to the diagnosis.
 - **Time-bound:** By when?
- ***Example: Patient will demonstrate effective coughing technique and clear lung sounds by the end of the shift.***



Activity 2: Make it SMART!

- **Diagnosis:** *Acute Pain related to surgical incision AEB patient rating pain 8/10 and grimacing.*
- **Task:** Write *one* SMART short-term goal for this patient.



The Plan in Action: Interventions

- What will the nurse *do* to help the patient reach the goal?
- Must be specific: Who, What, When, How Often, How Much?
- Types:
 - **Nurse-initiated:** Independent actions (e.g., repositioning, patient education).
 - **Physician-initiated:** Dependent actions (e.g., administering meds).
 - **Collaborative:** Working with others (e.g., PT, RT).
- *Example: Assess pain level q 2 hours. Administer Morphine 4mg IV q 4 hours PRN. Teach relaxation techniques.*



The 'Why': Rationale

- Explains *why* each intervention is being done.
- Links the intervention to evidence-based practice.
- Demonstrates critical thinking.
- Often starts with "To..."

Example (for assessing pain):
To establish a baseline and evaluate effectiveness of interventions.

Example (for administering Morphine):
To relieve pain by altering pain perception



Activity 3: Why Do We Do That?

Goal: *Patient will maintain a clear airway throughout the shift.*

Task: List *two* nursing interventions and provide a rationale for each.



Did it Work?

Evaluation

- Did the patient meet the goal?
- How do you know? (Provide evidence).
- Was the goal:
 - Met?
 - Partially Met?
 - Not Met?
- Based on evaluation, the plan may be:
 - Continued.
 - Modified.
 - Discontinued.

Example: Goal met. Patient reported pain 2/10 at 11:00. No grimacing observed. Continue current plan.



Mr. Somchai, 65, admitted with Pneumonia.

S: "I feel very weak and I can't stop coughing. It's hard to breathe."

O: T 39.0°C, HR 110, RR 28, SpO₂ 88% on RA. Coarse crackles L lower lobe. Productive cough with thick yellow sputum. Using accessory muscles. Looks tired.

Medical Dx: Community-Acquired Pneumonia.

Orders: O₂ to keep SpO₂ >92%, Cefuroxime IV, Paracetamol PRN, Encourage fluids.

**Case Study:
Mr. Somchai**



Task: Based on Mr. Somchai's data, choose *one* priority Nursing Diagnosis.

Write it in **PES** format.

Develop *one* **SMART** Goal.

List *three* **Interventions** (with specific details).

Provide a **Rationale** for each intervention.

Suggest how you would **Evaluate** it.

(Use the NANDA label:
Ineffective Airway Clearance)

Activity 4

Create Mr. Somchai's NCP



Mr. Somchai's NCP (Example)

Nsg Dx	Goal	Interventions & Rationales	Evaluation
Ineffective Airway Clearance R/T excessive <ul style="list-style-type: none">➤ thick tracheobronchial secretions AEB productive cough with yellow sputum➤ SpO2 88%➤ RR 28➤ coarse crackles LLL➤ patient states "It's hard to breathe."	Patient will maintain SpO2 >92% and demonstrate effective cough, clearing secretions by the end of the shift (8 hours).	<ol style="list-style-type: none">1. Assess RR, SpO2, lung sounds q 2 hrs. (To monitor respiratory status & response).2. Administer O2 via NC to keep SpO2 >92% as ordered. (To improve oxygenation).3. Encourage deep breathing & coughing, teach splinting, q 2 hrs. (To mobilize secretions & reduce pain during cough).	Goal partially met. At 15:00, SpO2 93% on O2 2L, RR 24. Lung sounds improved but some crackles remain. Sputum thinner. Continue plan.



Key Takeaways & Your Questions

- ✓ **NCPs are essential, individualized roadmaps.**
- ✓ **ADPIE is the foundation.**
- ✓ **Mastering PES, SMART Goals, and Rationale is key.**
- ✓ **Clarity and precision in English are crucial.**

Thank you!