Nursing Care Plan of Child with Cystic Fibrosis

Nursing Diagnosis	Expected patient outcomes	Nursing Interventions	Rationale
Ineffective airway clearance related to thick tenacious mucous **<u>Objective and Subjective Data</u>** **Meconium ileus as newborn** Abdominal distention vomiting, failure to pass stoo,ls and development of dehydration **Gastrointestinal** Large, bulky, loose, frothy stools (steatorrhea), increased appetite early in disease with loss of appetite later, weight loss, tissue wasting, failure to grow, sallow skin, deficiency of fat-soluable vitamins **Respiratory** **Initial** Wheezy respirations Dry, non-productive chronic cough **Later** Increased dyspnea, productive cough, areas of atelectasis, scarring of lung tissue, over-inflated barrel like chest, cyanosis, clubbing of fingers and toes, repeated episodes of bronchitis and bronchopneumonia, rhinitis, chronic sinusitis	**Child will maintain a patent airway**	1. Auscultate breath sounds every 2-4 hours 2. Assist child to cough and expectorate mucous 3. Monitor respiratory pattern – rate and effort 4. Provide nebulization 5. Suction PRN 6. Perform chest physiotherapy 7. Teach child and family to use bronchodilator medications 8. Teach child and family to administer mucolytic medications 9. Teach child and family to assess airway status using peak flow meter	1. Assess respiratory status 2. Promote airway clearance 3. Monitor decrease viscosity of mucous & improved airway function 4. To loosen secretions 5. To loosen secretions 6. To facilitate removal of mucous 7. Help loosen secretions and open airways 8. To liquefy secretions 9. To promote compliance at home and monitor treatment protocols

Endocrine Elevated serum glucose levels, development of cystic-fibrosis related diabetes			
Imbalanced Nutrition: Less than body requirements related to inability to digest nutrients and loss of appetite **<u>Objective and Subjective Data</u>** Immature developmental level for age Weight loss with adequate food intake steatorrhea Abdominal Cramping Hyperactive Bowel Sounds	**Will exhibit signs of adequate digestion and appropriate height and weight for age**	1. Administer pancreatic enzymes with meals and snacks 2. Teach child and family appropriate pancreatic enzyme administration a. Take with meals or snacks b. Capsules can be swallowed whole or opened and sprinkled on food, but not crushed or chewed. 3. Encourage high protein diet 4.Observe frequency and nature of stools 5. Monitor child's physical development	1. Replacement enzymes are necessary for digestion to occur with cystic fibrosis 2. To prevent destruction of enteric coating that results in inactivation of enzymes and excoriation of oral mucosa 3.To promote optimal digestion 4. To assess for potential nutritional problems and determine amount of replacement enzymes needed. If stools loose, require more replacement enzyme. 5. To determine if meeting growth milestones for age

Knowledge deficit related to child and family unfamiliarity with chronic disease management **<u>Objective and Subjective Data</u>** Child does not take medications as ordered Child and family do not adhere to treatment plan Child and family verbalize lack of understanding of treatment plan	**Will be able to verbalize understanding of disease process** **Express understanding of infection control** **Express understanding of Illness care** **Verbalize and demonstrate knowledge of treatment procedures**	1. Begin discharge planning as soon as possible 2.Assess for needed support systems 3. Arrange for home health services to help provide care if possible 4. Instruct on reporting effectiveness of treatments and medications to physician 5. Involve child in self care 6. Encourage child's involvement in school and sports 7. Teach child to recognize symptoms of inadequate therapy, signs and symptoms of respiratory infections, and need for physician follow-up 8. Teach importance of setting realistic goals and expectations such as increasing activity level, school attendance or possible hospitalizations	1. To begin transition to home 2. Aid in smooth transition to home with adequate support system in place 3. To determine if adhering to medical regimen and provide support 4. Establish and encourage realistic expectation of activity and energy level 5. Encourage health promotion 6 Encourage socialization with peers 7.Promotion of age appropriate activities Prevention of long-term consequences related to poor response to treatment 8. Promotion of behaviors appropriate for age and to establish short-term goals that can be successfully met.

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