Kidney Stones Nursing Care Plan

Patient infor	mation					
Name:				Age:		
Gender:	Male	Female	Other:			
Medical recor	d number:			Date:		
Medical histo	ory					
Relevant medical history:						
Current medic	cations:					
I. Assessmer	nt					
Symptoms d	ocumentat	tion				
Primary symp	otoms:					
Duration of sy	/mptoms:					
Severity of sy	mptoms:					
Physical exa	mination					
Bladder diste	ntion:					
Lower abdom	inal discom	nfort:				
Pelvic examir	nation:					
Diagnostic te	esting					
Urinalysis res	ults:					
Bladder scan	•					
Urodynamic t	est results:					

II. Nursing diagnosis
Primary diagnosis
Secondary diagnosis
Acute pain:
Risk for infection:
III. Planning
Short-term goals:
Long-term goals:
IV. Interventions
Pain management:
Hydration therapy:

Dietary management:
Medication administration:
W.E. al. after
V. Evaluation
Monitor and document:
Adjust care plan:
7 Adjust Gallo Plan.
Follow-up:
VI. Documentation and communication