

Pneumothorax Nursing Care Plan

Patient information

Name:

Age:

Gender:

Medical history:

Allergies:

Assessment

1. Respiratory status:

2. Chest pain:

3. Vital signs:

- Heart rate:
- Blood pressure:
- Respiratory rate:
- Oxygen saturation:

4. Breath sounds:

5. Chest wall symmetry:

Diagnosis

Planning

1. Goal:

• Interventions:

2. Goal:

• Interventions:

3. Goal:

• Interventions:

Implementation

Evaluation

Nurse's name:

Date:

Signature: