Nursing care plane

Nurse name Date

Client name Age

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Assessment** | **Nursing Diagnosis** | **Diagnosis** | **orders** | **Rataoinale** | **Implementions** | **Evaluation** |
|  |  |  |  |  |  |  |

Nursing care plane

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| **Nursing Diagnosis** |

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| --- | --- | --- | --- |
| Date | Nursing Outcomes | Nursing Interventions | Evaluation |
|  |  |  |  |

Nursing care plane

Student……………………Patient Identifier Code…………………..Date…………………….

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| Nursing Diagnosis |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Assessment | Expected Outcomes | Interventions | Rataoinale | Evaluation |
|  |  |  |  |  |