Nursing Care Plan
Nausea and Vomiting (Potential or actual)

Risk Factors
- Female sex
- <30 years old
- History of sickness i.e. in pregnancy, motion sickness or following surgery
- Poor control with prior chemotherapy
- Anxiety

Other contributing factors
- Other drug therapy i.e. opioids, antibiotics, anti-fungals
- Electrolyte imbalance and dehydration
- Constipation
- Hepatic dysfunction

- Assess the potential for nausea and vomiting
- Minimise exacerbating factors such as food smells, constipation, dehydration and anxiety
- Encourage patient to report early signs of nausea
- Give anti-emetics according to department protocol and ensure anti-emetics are given regularly
- If control is not achieved review anti-emetic regimen in line with chemotherapy / conditioning protocol
- Try non-pharmacological measures such as ginger, travel bands, diversion activities and small, frequent meals and snacks
- If standard therapies are ineffective, seek advice from the palliative care team
- Monitor dietary and fluid input - complete food and fluid balance charts
- Administer intravenous fluids if oral input is < 2 litres
- If medication is not tolerated orally due to problematic N & V discuss with medical team conversion to IV medications until N & V is controlled

Name
Hospital Number
Signature