Care Plan for the Patient Suffering with Hyperemesis Gravidarum

Care Plan for
Date of admission
Weeks gestation at admission
Pregnancy number
Children at home
History of twins: yes / no
Weight at admission: KG
HeightCM
BMI
Patient reported weight loss
% of pre-pregnancy weight loss
Blood Pressure//
Ketone level on admission
TED Stockings provided? YES / NO
Aims of Care Plan:
1. Reduce nausea and vomiting
2. Reduce presence of ketones and increase hydration
3. Prevent further weight loss
4. Provide emotional and psychosocial support to
5. Provide a comfortable environment for

Nursing Actions for Care Plan:

- 1. Reduce Nausea and Vomiting
- Ensure medication is provided on time to enable stable blood levels of anti-emetics.
- Reduce sensory stimulation by providing a side room away from 'smelly areas', if possible, and ensuring staff are quiet and free from perfume whilst providing care.
- Provide snacks when required where possible.
- Review effectiveness of medication and interventions daily or as required, using MUST or PUQE tool.

2. Reduce Presence of Ketones

- Provide IV fluids as per prescription. (See Part 2, Chapter 5 for more info)
- Warm IV fluids to 37 degrees before administration, if possible. This is to reduce calorific loss from cold IV fluid administration.
- Encourage oral fluids when they can be tolerated.
- Provide information on suitable fluids for pregnancy and tips on getting fluids, for example, via ice lollies.
- Monitor ketones as per hospital policy or three times per day.

3. Prevent Further Weight Loss

- Encourage oral food intake where possible.
- Provide information on fortifying food and fluid. (Information available on PSS website and in chapter 6)
- Ensure medication regime is controlling vomiting and nutrient loss. Adjust timings to maximise ability to eat at mealtimes.
- Provide snacks as and when feels able to eat.

4.	Provide	Emotional	and	Psychosocial	Support	to
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Where available, discuss referral to peri-patal mental health team for support with psychological impact of HG and

- Where available, discuss referral to peri-natal mental health team for support with psychological impact of HG and refer if appropriate.
- Provide information about PSS charity and make referral to support network if required.
- Ensure has an advocate for ward rounds with doctors if she is struggling with speaking due to nausea and vomiting.
- Ensure informed consent is obtained for treatments.
- Provide written information about hyperemesis and any treatments or medication.

5. Provide a Comfortable Environment for.....

- Provide a side room where possible to reduce sensory stimulation such as smell and sound and reduce distress from public vomiting and episodes of incontinence.
- Ensure staff are free from perfumes or cigarette smoke.
- Provide pressure relieving mattress to reduce the risk of pressure damage from prolonged bed rest.
- Ensure vomit bowls and urine samples are removed promptly and adequate empty receptacles provided.

