

**Beebe Healthcare**  
**Margaret H. Rollins School of Nursing**  
**Nursing 101 - Foundations of Nursing**  
**Nursing Process-Day 2 Class Preparation (CP)**

**The nurse is caring for a patient on the medical-surgical unit. The following data have been collected:**

- “Why do I need surgery?” Subjective
- “What are they going to do?” Subjective
- 99.4-92-20 138/88 Objective
- pacing floor Objective
- alert and oriented to time, place, and person Objective
- skin warm and dry Objective
- turgor elastic Objective
- mucous membranes moist Objective
- capillary refill < 3 seconds Objective
- HR regular Objective
- palpable peripheral pulses Objective
- active bowel sounds x 4 quadrants Objective
- abdomen tender RUQ Objective
- facial grimacing with RUQ palpation Objective
- “Ouch, it hurts when you press there!” Subjective
- RUQ pain rated 7 on 0-10 scale Objective
- c/o nausea and vomiting Objective
- “I throw up every time I eat something.” Subjective
- voided 600 mL clear yellow urine Objective
- sensation intact Objective
- history of gallstones Objective

Utilizing the nursing process:

1. Identify the subjective & objective data.
2. Identify problem-focused (ACTUAL) nursing diagnoses using the NANDA list. (cluster the data to help determine problems)
  - a. Acute Pain
  - b. Nausea
  - c. Anxiety
3. Identify risk nursing diagnoses using the NANDA list.
  - a. Risk for electrolyte imbalance
  - b. Risk for unstable blood pressure
4. Write your clinical reasoning for each. (why?)

Hayley McCabe

Acute Pain: Pt described 7/10 for pain in her RUQ and grimaced and tender during abdomen palpation,

Nausea: Pt described vomiting after eating and complained of nausea and vomiting.

Risk for electrolyte imbalance: Pt c/o vomiting upon eating, voiding 600 mL

Anxiety: Pt pacing the floor.

Risk for unstable blood pressure: Pt BP slightly elevated 138/88

5. Write one expected outcome (goal) for each nursing diagnosis.

Patient will have a pain level of 4/10 by the end of my shift.