Student Name ___Madison Hoehn_______________________
ATI Real Life Scenario____CKD_________

*Complete and submit to the corresponding dropbox by 1600 on the assigned clinical day.

To Be Completed Before the Simulation

****** Blue boxes should be completed using textbook information. What do you expect to find? This information should be collected before you start the ATI simulation.

Medical Diagnosis/ Disease: ________CKD________________________

NCLEX IV *(8)*: **Physiological Integrity/Physiological Adaptation**

Anatomy and Physiology Normal Structures

2 Kidneys, 2 ureters, 1 bladder, 1 urethra make up the urinary system.

The kidneys' main function is to filter and excrete waste products from the blood. They are also responsible for water and electrolyte balance in the body. Metabolic waste and excess electrolytes are excreted by the kidneys to form urine. Urine is transported from the kidneys to the bladder by the ureters. It leaves the body via the urethra.

Pathophysiology of Disease

Chronic kidney disease (CKD) is long-standing, progressive deterioration of renal function. Decreased renal function interferes with the kidneys' ability to maintain fluid and electrolyte homeostasis. The ability to concentrate urine declines early and is followed by decreases in ability to excrete excess phosphate, acid, and potassium

NCLEX IV *(7)*: **Reduction of Risk**

Anticipated Diagnostics Labs

Urinalysis
BUN/Cr
Electrolytes
CBC

Additional Diagnostics

Cystoscopy
Kidney biopsy
US
KUB – Xray
CT
MRI

NCLEX II *(3)*: **Health Promotion and Maintenance**

Contributing Risk Factors

Older age
Male
African Americans
Hypertension

Signs and Symptoms

Hypertension
JVD
Edema
SOB/Dyspnea
Tachypnea
Change in amount and concentration of urine.
Weight gain.

NCLEX IV *(7)*: **Reduction of Risk**

Possible Therapeutic Procedures

Non-surgical

Hemodialysis
Peritoneal dialysis

Surgical

Kidney transplant

Prevention of Complications

(What are some potential complications associated with this disease process)

Hypotension
Fluid overload
Infection
Anemia

NCLEX IV *(6)*: **Pharmacological and Parenteral Therapies**

Anticipated Medication Management

Lasix
Electrolyte replacement
Aspirin

NCLEX IV *(5)*: **Basic Care and Comfort**

Non-Pharmacologic Care Measures

Fluid restriction
Daily weight
Renal diet -reduced Na and K.

NCLEX III *(4)*: **Psychosocial/Holistic Care Needs**

What stressors might a patient with this diagnosis be experiencing?

Anxiety from hospitalization and new dialysis

Client/Family Education

List 3 potential teaching topics/areas

- **Importance to adherence of dialysis treatment**
- **Monitoring BP and weight**
- **Medication adherence**

NCLEX I ***(1)*****: Safe and Effective Care Environment**

Multidisciplinary Team Involvement

(Which other disciplines do you expect to share in the care of this patient)

Nephrology
Case worker – help setting up dialysis.
PCP

Anticipated Patient Problems, Goals, & Interventions Based on Medical Diagnosis

** This worksheet should be completed before you begin the ATI simulation.

Problem #1:____Decreased Cardiac Output____

Patient Goals:

1. ___Will maintain HR between 60-100 during my time of care. __________________
2. ____Will maintain urine output of >30ml/hr during my time of care._____________

Assessments:

- __Monitor BP, HR. Monitor urine output Q4. Monitor labs daily. ________________

Interventions (In priority order):

1. ___Prepare for dialysis as ordered.____
2. ___Maintain fluid restriction as ordered.____
3. ___Report urine output of <30ml/hr to provider.____________________________________
4. _____Administer medications as ordered.____
5. _____Report HR <60 bpm during my care.____
6. ___Educate to weigh themselves daily in the morning. ___________________________

Problem #2:__Excess Fluid Volume.____

Patient Goals:

1. ___Will maintain urine output of >30ml/hr during my time of care.________________
2. Will maintain a balanced intake and output and stable weight, during my time of care.____

Assessments:

- Monitor urine output Q4, Monitor intake as given. Weigh daily. Monitor labs daily. __

Interventions (In priority order):

1. ___Administer Lasix as ordered.____
2. ____Maintain fluid restriction as ordered.____
3. ____Report decreased urine output of <30ml/hr to provider. ________________________
4. __Report increase in weight of >5% daily.____
5. __Report signs of electrolyte imbalances to provider as needed. _____________________
6. __Maintain salt restricted duet during my care. ________________________________

At this time, complete assigned ATI Real Life Simulation

Actual Patient Problems & Goals

** The following should be completed after the ATI simulation.

Problem #1: ___Excess fluid volume____

Patient Goals:

1. ___Will produce >100ml of urine within 1 hour after administration of Lasix, and >/= 30ml/hr during my care. _ Met ☐Unmet ☐
2. __Will maintain clear lung sounds during my time of care. _____________________ Met ☐ Unmet ☐

Problem #2: ____Readiness for enhanced learning. _____________________________________

Patient Goals:

1. __Will describe correct process of hemodialysis after teaching during my time of care. ___ Met ☐ Unmet ☐
2. __Will notify nurse of provider if noticing complications with hemodialysis during my time of care. ______ Met ☐ Unmet ☐

SOAP Notes Based on Priority Problems

Priority Patient Problem #1: ____Excess fluid volume__________________________

Subjective: *This section explains the client symptoms. Include a narrative of the patient's complaints/concerns and/or information obtained from secondary sources.*	**Chief Complaint:** Difficulty completing peritoneal dialysis two days ago. Weight gain of 13.2 kg/6.6lbs. SOB and edema. **PMH:** CKD, type 2 diabetes mellitus, hypertension, uremic pruritis, peripheral neuropathy of lower extremities. **Allergies:** NKA **Current Medications:** Glipizide XL 20mg PO daily Aspirin 81mg PO daily Losartan 50mg PO daily **Furosemide 20 mg PO BID** Ferric citrate 1g PO TID with meals Linagliptin 5mg PO daily Tramadol 50mg PO Q6 PRN Sevelamer carbonate 800mg PO TID with meals Docusate sodium 100mg PO BID Tacrolimus 0.1% ointment Gentamicin 0.1% ointment Gabapentin 100mg PO TID Atorvastatin 20 mg PO daily
Objective: *This section is your clinical observations. Include, pertinent vital signs, pertinent labs and diagnostics related to priority problem.*	**Vital Signs: (1st set)** Temp 37.2, BP 170/92, HR 110, RR 22, 95% on RA. **Labs:** Na 132, K 6, BUN 42, Cr 8, Phos 7.5, Ca 8, GFR 8. **Diagnostics:** Chest XR – Bilateral pulmonary venous congestion with infiltrates. No cardiomegaly. EKG – Sinus tachycardia with peaked T waves, HR 116

A̲ssessment: *Focused assessment on your priority problem.*	**Respiratory –** scattered rhonchi bilaterally, regular respiration pattern, tachypneic, labored with activity. **Peripheral Vascular** - +2 pitting edema on bilateral lower extremities. **Cardiac –** tachycardia
P̲lan ***Based on priority problem only** *Include what your plan is for the client. What treatments or medications are needed. You can include procedures, consults, labs/diagnostics, etc. What nursing interventions are being performed?*	**Plan:** Strict I&O Telemetry Daily weight Renal diet with 1L fluid restriction Hemodialysis in AM Furosemide 80mg IV bolus x1 dose **Teaching/Resources:** Fistula care Renal diet and fluid restriction Weigh daily. Nephrologist follow up

Priority Patient Problem #2: ____Readiness for enhanced learning. ___________________

S̲ubjective: *This section explains the client symptoms. Include a narrative of the patient's complaints/concerns and/or information obtained from secondary sources.*	**Chief Complaint:** Difficulty completing peritoneal dialysis two days ago. Weight gain of 13.2 kg/6.6lbs. SOB and edema. Will be starting new hemodialysis, has many questions and concerns.
O̲bjective: *This section is your clinical observations. Include vital signs, pertinent labs and diagnostics related to priority problem.*	**Vital Signs:** **@1830 –** 37.2 Temp, HR 118, RR 24, 94% on RA. **Labs:** Na 132, K 6, BUN 42, Cr 8, Phos 7.5, Ca 8, GFR 8. **Diagnostics:**

<u>**A**</u>**ssessment:** *Focused assessment on your priority problem.*	"How does hemodialysis work?" "What are some complication of hemodialysis?"
<u>**P**</u>**lan** <u>***Based on priority problem only**</u> *Include what your plan is for the client. What treatments or medications are needed. You can include procedures, consults, labs/diagnostics, etc. What nursing interventions are being performed?*	**Plan:** Provided with visual and explained how hemodialysis works compared to peritoneal dialysis. Explained common complication of hemodialysis which is hypotension. **Teaching/Resources:** Nephrology PCP Support groups Transportation to dialysis Fistula care

<u>**Reflection:**</u>

1. Go back to your Preconference Template:
    a. Indicate (circle, star, highlight, etc.) the components of your preconference template that you saw applied to the care of this virtual patient.

2. What was your biggest "take-away" from participating in the care of this patient? How did this impact your nursing practice?

____My biggest take away from the care of this patient is how important education is to our patients. In the scenario the patient had many concerns and questions about switching to hemodialysis. So, a lot of time was spent on education about how it works and complications that can occur. This impacted my nursing practice because I will now take the time of educate my patient especially when a new treatment is going to be started so they feel comfortable and aware of what is going on and the rationale of it.

Time Allocation: 8 hours

CP:\N202 – Advanced Concepts of Nursing – Course Planning – 2023- Course Documents – ATI- ATI Real Life Student Packet with SOAP Notes-2023