

## Nursing Problem Worksheet

Name: Destiny Klinger

<b>Anticipated Patient Problem  and  Goals</b>	<b>Relevant Assessments</b>	<b>Multidisciplinary Team Intervention</b>
	(Prewrite) What assessments pertain to your patient's problem? Include frequencies	(Prewrite) What will you do if your assessment is abnormal?
Problem: Impaired gas exchange Reasoning: consolidation in the LUL on Xray, resent chest tube removal, in bed except of 30 mins 2x/day Goal: Spo2 will be maintained above 94% during my time of care.  Goal: Pt. will have normal respirations by the end of my time of care.	Assess respiration quality, rate, rhythm, depth and effort to breath q4 hr, prn	Position pt. upright in chair 2x/day
	Auscultate for adventitious lung sounds at beginning of care day	Educate pt. on how to properly use IS q2 hrs
	Assess for restlessness and change in LOC throughout my time of care	Apply O2 nasal cannula to maintain Spo2 above 94%
	Monitor for signs and symptoms of atelectasis q 4 hrs	Q 2 turns to facilitate secretion movement
	Monitor Spo2 q4 hrs	Take pulse oximetry q 1 hr to ensure Spo2 maintained at desired rate
	Assess for pain while performing deep breathing techniques	Educate on proper splinting technique
<b>Anticipated Patient Problem  and  Goals</b>	<b>Relevant Assessments</b>	<b>Multidisciplinary Team Intervention</b>
	(Prewrite) What assessments pertain to your patient's problem? Include frequencies	(Prewrite) What will you do if your assessment is abnormal?
Problem: Impaired urinary elimination Reasoning: said that the urine output has decreased over the last 1hr with and increase in creatine (2.8), when challenged with 250ml of fluid = no UOP change, BUN = 65 Goal: Pt. will void at least 120 during my time of care. Goal: On postvoid residual scan it will be < 200 ml of urine during my time of care.	Assess I & O q 4 hr, prn	Drain and measure indwelling catheter q 4 hrs
	Assess for pain or discomfort while urinating	Administer acetaminophen 650mg q6hr, prn
	Percuss and palpate the abdomen for a distended bladder	Perform a post void residual scan q 4 hrs
	Assess the pt. usual voiding pattern at beginning of my care day	Offer bathroom trips q 2-3 hrs, prn
	Monitor BUN and creatinine lvls q 4 hrs	Provide adequate hydration without overloading with fluids q 4 hrs
	Assess for dripping or hesitancy once catheter is removed	Educate on proper pelvic floor strengthening exercises

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