

## Nursing Problem Worksheet

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Anticipated Patient Problem  and  Goals	Relevant Assessments  (Prewrite) What assessments pertain to your patient's problem? Include frequencies	Multidisciplinary Team Intervention  (Prewrite) What will you do if your assessment is abnormal?
<b>Problem:</b> Acute pain. <b>Reasoning:</b> CC is RLE foot pain, possible ulcer from type 2 diabetes/edema from CKD. <b>Goal:</b> Pain will be a 0/10 on the numeric pain scale by the end of my care. <b>Goal:</b> Patient will be able to rest comfortably as shown by a RR of 12-20 per minute during my time of care.	Assess pain rating on numeric scale q2hrs.	Administer Acetaminophen 650 mg prn mild pain (1-5) q6hrs.
	Assess facial expressions, behavior, body language, and signs of guarding q2hrs.	Cluster care and provide rest periods in between care activities prn.
	Assess respiratory rate and heart rate when resting q4hrs.	Administer nonpharmacological care measures such as distraction, ice, heat, and breathing exercises q2hrs.
	Assess location, intensity, quality, and radiation of pain q2hrs.	Reposition client to comfortable position and float heels with pillows/boots prn.
	Assess pain rating on numeric scale with ambulation/repositioning.	Administer prophylactic pain medication 30 mins before q ambulation/repositioning.
	Assess state of room q shift.	Adjust temperature, lighting, and sound level of room q shift.

Anticipated Patient Problem  and  Goals	Relevant Assessments  (Prewrite) What assessments pertain to your patient's problem? Include frequencies	Multidisciplinary Team Intervention  (Prewrite) What will you do if your assessment is abnormal?
<b>Problem:</b> Risk for impaired skin integrity. <b>Reasoning:</b> Impaired immune function, poor circulation and oxygen delivery to skin, high blood glucose, and possible neuropathy due to type two diabetes. Pruritus from CKD. <b>Goal:</b> No new skin breakdown will develop during my time of care. <b>Goal:</b> Blood glucose will be above 70 but below 110 during my time of care.	Perform thorough skin assessment q2hrs.	Implement use of zinc oxide cream to sacrum q2hrs and prn.
	Assess Braden score q shift.	Implement use of taps pad, aquacel on sacrum, pillows under bony prominences, and wedges q 2hrs.
	Assess total protein level and PO dietary intake q shift.	Educate on importance of increasing protein intake and following carbohydrate-controlled diet q shift.
	Assess blood glucose level QID.	Administer Insulin Aspart Recombinant QID subcutaneously.
	Assess activity level and frequency of ambulation q shift.	Reposition between supine, left side, and right side q2hrs.
	Monitor for incontinence or prolonged exposure to moisture q2hrs.	Replace linens and chucks pad prn.