

MARGARET H. ROLLINS SCHOOL OF NURSING

N101 Care Plan Form

Student Name: Layla Espinola-Keel

General Information

Patient Initials: E.S. **Date(s) of Care:** 9/23/25 – 9/24/25 **Clinical Instructor:** Dr. Bouni, Mrs. Lagano **Attending physician:** Dr. Rualo

Reason for admission/Medical Diagnosis: Dehydration

Allergies: Nuts, Latex, Penicillin **Date of Birth:** 01/01/1962 **Age:** 63 F **Admission Date:** 09/30/25

Primary Nursing Diagnosis & Clinical Reasoning	Additional Pertinent Nursing Diagnoses
Dehydration aeb decreased BP (93/60), dry mucous membranes, sluggish skin turgor	Fall Risk aeb "I feel so weak, I don't want to fall", c/o dizziness, possible medication side effects, Morse score 45
Expected Outcome (s)	Assigned Medications & IVF <i>(dose, frequency, route)</i>
E.S. will not vomit during my care	Prochlorperazine 10mg 1 tab PO q6 PRN nausea/vomiting
E.S. intake will be greater than or equal to 100mL by the end of my care	0.9% NSS with 20 meq KCL 1000mL infusing at 100mL/hr
Patient care orders <i>(treatment, diagnostic studies, labs, etc.)</i>	
CT Scan: normal abdomen findings	I&O q8
Chest X-ray: Eval lung CA 4cm mass R Lung, no new infiltrates	Vital Signs q4
Oncologist Consult: chemotherapy regimen	IV flush q8 when not in use
Nutritionist: impaired nutrition, weightloss	Cardiac Monitoring, continuous, change electrodes daily
Case Manager: routine	Full Code
Physical Therapy: Eval and treat weakness	Diet: Clear Liquids, add clear liquid protein supplements to each meal
CBC w/auto diff: daily/3 days	Activity: Out of Bed PRN w/ assistance
Basic Metabolic Panel: daily/3 days	Braden & Fall Score: q shift

Data Collection (Mandatory Satisfaction Completion) <i>(for each day of care)</i>	
Day 1 <i>(can include pertinent data prior to your day of care)</i>	Day 2
<p>Subjective: "I feel so weak", "I feel sick and cant stop throwing up"</p> <p>Objective: Pt. hypotensive 103/67</p> <p>Own assessment: Pt. Fall Risk: 45 High Risk, Braden: 14 High Risk, PERLA, Peripheral pulses weak and thready, c/o abdomen pain 2/10, skin intact 103/67, 18 RR, 37.2 Celsius, 97% RA, 90 HR</p>	<p>Subjective: "I still feel nauseous, can I have anything?"</p> <p>Objective: pt. refused to drink fluids and PO medication</p> <p>Own assessment: Pt. Fall Risk: 45 High Risk, Braden: 15 High Risk, PERLA, Skin intact: Sacrum reddened, non-blanchable, clean, dried, aqua cell applied, c/o abdomen soreness, refusal to ambulate 93/60, 98% RA, 88 HR, 37.2 C</p>

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Labs & Diagnostics (include interpretation): CT: normal abdomen findings, Chest X-ray: eval lung CA; 4cm mass Right Lung, no new infiltrations CBC: 4.0 WBC, 11 Hgl, 95 plt, Hct 37.21 BMP: Na+ 131, Cl 85, BUN 19, glu 94, creat 1.7, CO 272, K+ 3.2	Labs & Diagnostics (include interpretation): CBC: 3.0 WBC, 12 Hgl, 90 plt, Hct 38 BMP: Na+ 131, Cl 87, BUN 18, glu 92, creat 1.68, CO 27, K+ 3.3
Nursing Assessments <i>(Include Timeframes)</i>	Rationale
1. Assess I&O's continuously 2. asses nausea and vomiting q2-4hr 3. assess mucous membranes and skin turgor q shift 4. monitor vitals q4	1. Allows measurement of fluid volume and possible fluid retention. Measurement of dehydration 2. determines if PRN Prochlorperazine should be offered to pt. PRN 3. assess presence or absence hydration 4. measurement of pt. status and HR/BP are indicators of hydration
Nursing Interventions <i>(include timeframes)</i>	Rationale <i>(relate how NIs will help correct ND)</i>
1. Offer preferred fluids qhourly rounding, small freq. sips 2. administer Prochlorperazine PRN nausea/vomiting when requested if applicable 3. Offer liquids, maintain IV fluids as ordered to maintain hydration 4. Nutritionist and Provider consult	1. hydrates pt. and mucous membranes 2. decreases symptoms of nausea and vomiting 3. ordered IV fluids hydrate the pt. if unable to ingest fluids PO 4. If pt. does not improve as result of interventions, orders may need alteration

Evaluation Summary	
1. For each expected outcome, answer the following: (a) Are expected outcomes realistic and met? (b) Will they remain the same or change? (c) Why?	2. Did NIs change or remain the same? If changed, state why. One NI changed, E.S. requested oral antiemetics d/t nausea and inability to keep anything down. The IV medications worked better as fluid intake increased with no vomiting.
a. EO #1: Yes this is realistic and was met. My patient did not vomit during my care. EO #2: Realistic but was not met. Pt. drank 90mL/100mL during my time of care.	3. Does the ND still exist and why? The ND will still exist for the patient due to the potential of reoccurrence of nausea and vomiting. By the end of my time of care the patient displayed improvement. Fluid intake was 90mL of clear liquids with no incidences of vomiting.
b. EO #1: This will remain the same. E.S. has refused PO medications and preferred IV medications. This has helped nausea and no recent incidents of vomiting. EO #2: This will change. E.S. has not met this goal but has demonstrated the ability to drink and keep fluids down. This goal should increase from an intake of 100mL	

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<p>c. EO #1: E.S. prefers IV medications. Was able to keep down more fluids without nausea or vomiting. EO #2: E.S. is experiencing less nausea and vomiting so fluid intake should increase to address CC of dehydration</p>	
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Nursing Care Plan Grading Rubric

Topic	Criteria	Satisfactory = 1 point	Unsatisfactory = 0 points	Category Total
General Information	<ul style="list-style-type: none"> All general information filled out correctly and completely. All assigned medication orders included and complete. All current doctor's orders included. <i>(dates of care and standing orders)</i> All IV fluids must be included. 	Meets 3 or more of the elements described in criteria.	Meets 2 or less of the elements described in criteria.	
Nursing Diagnosis/Problem List	<ul style="list-style-type: none"> Highest priority nursing diagnosis is correct. Clinical reasoning is listed & correlates to priority problem. Other pertinent nursing diagnoses are listed. Priority order is correct >50% of the time. 	Meets 3 or more of the elements described in criteria.	Meets 2 or less of the elements described in criteria.	
Expected Outcomes	<ul style="list-style-type: none"> EO's are included for top priority problem. EO's are specific, realistic, measurable, written in terms of patient behavior, and include a time frame >50% of the time. EO's are relevant to patient problem >50% of the time. 	Meets 2 or more of the elements described in criteria.	Meets 1 or less of the elements described in criteria.	
Data Collection (Mandatory Section)	<ul style="list-style-type: none"> Subjective and objective data included for each day. Own assessment included for each day. Relevant diagnostic studies and labs included and interpreted correctly >50% of the time. Relevant data included to support patient problem >50% of the time (i.e.: VS, I&O, ht. wt., etc.). Data concise, summarized, organized in chronological order. 	Meets 4 or more of the elements described in criteria.	Meets 3 or less of the elements described in criteria.	
Nursing Interventions	<ul style="list-style-type: none"> Nursing assessments with rationale included >50% of the time. Five NI's with time frames & rationales are included. NI's are individualized, realistic & include a time frame >50% of the time. Rationale correct, complete & specifically written to help correct patient problem >50% of the time. 	Meets 3 or more of the elements described in criteria.	Meets 2 or less of the elements described in criteria.	

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Evaluation Summary	<ul style="list-style-type: none"> All three evaluation questions are addressed. Conclusions for each question are correct >50% of the time. 	Meets 1 or more of the elements described in criteria.	Does not meet either element described in criteria.	
Format	<ul style="list-style-type: none"> No more than 3 misspellings or grammatical errors. No more than 3 errors in medical terminology. Printed single-sided for submission to instructor. Grading Rubric printed and attached as separate page. 	Meets 3 or more of the elements described in criteria.	Meets 2 or less elements described in criteria.	
Grading Scale		<u>6-7 = Satisfactory</u>	<u>0-5 = Unsatisfactory</u>	Total Score _____

C&P:\N101 – Foundations of Nursing\Course Planning\2022\Course Documents\Clinical\Care Plan\Nursing Care Plan - 2022}