

R.B. Turnbull, Jr., M.D. School of WOC Nursing

Daily Journal Entry with Plan of Care & Chart Note

Student Name: Katrina Farley Preceptor: Julianne Cordes Day/Date: Practicum 5 12/31/20

Directions: WOC nurses function as consultants and develop plans of care for other caregivers as a guide to providing care in the WOC nurse's absence. For this assignment, select one patient each clinical day and complete *plan of care and chart note*.. This assignment should be WOC focused, and approached as both patient documentation and critical thinking development. Using a holistic WOC nursing approach combined with critical thinking strategies, complete each section of the document. Give careful consideration to how the patient was assessed, the problems, and the rationale behind the plan of care, and provide thorough documentation on the patient encounter. Once you have completed the form, save the document by clinical date and preceptor, and submit to your Practicum Course dropbox for instructor review & feedback. Journals should be submitted to your dropbox by no later than **48 hours following the clinical experience day.**

<p>Today's WOC specific assessment</p>	<p>Today we were consulted on a 17 year old gentleman who had come to outpatient surgery for an excision of a recurrent pilonidal cyst. The patient had a debridement of this cyst in May and at that time a negative pressure wound therapy device had been placed, in which the patient's mother commented, " it healed within a month." The patient has recently noticed drainage at the incision site and multiple hair shafts at the gluteal cleft. The cyst has become painful and is aggravated more by bending or sitting. The surgeon's note stated that there is no abscess within the cyst but due to possible tunneling excision and debridement seems appropriate. The surgeon had requested a negative pressure wound therapy device previously to the surgery to be applied during surgery. The patient's insurance would not cover the device that the facility orders. After consultation with the device representative a device that would be covered along with dressings were ordered.</p> <p>The patient's only past medical history and past surgical history is the recurring pilonidal cyst. The patient has been taking only tylenol for pain at home and is on no other medications.</p>

Write a chart note for the medical record for this patient encounter. Be sure to include specific products that were used/recommended for use:

<p>A wound care consult was placed for the placement of a negative pressure wound therapy device during surgery for the excision of a pilonidal cyst. Upon entry into the OR room the patient was surgically draped in the prone position. The surgeon had just excised and debrided the pilonidal cyst on the medial gluteal cleft. The incision measured 7.5cm x 3 cm x 3.5cm. There is no tunneling or undermining. The wound bed is clean and red, with no bleeding, drainage or erythema. The wound margins are clean and there is no bone exposed. The patient has a lot of hair to the epidermis which was shaved for surgery.</p> <p>The wound bed was cleansed with Normal Saline and allowed to dry. The periwound area was prepped with skin prep. The wound was pictured framed with the clear drape. Sterile gloves were donned. The wound was filled in with black foam recording the number of pieces used. In this case there were 1 black foam to fill the wound and 2 to divert the trackpad away from the pressure of the coccyx. The wound was then covered with a clear drape. A quarter size hole was placed over the black foam where the trackpad would rest and the track pad was applied. The NPWT device was set for -125mmHG suction. The dressing maintained suction and no air leaks were indicated. A label was placed on the dressing indicating the date, time, and amount of black foam used in the dressing.</p> <p>If the NPWT device indicates a leak, drape may be applied over the drape to manage the leak. If the seal becomes unable to provide suction it is important to remove the dressing and place a wet to dry dressing until the NPWT dressing can be replaced.</p> <p>An appointment was previously set up with the outpatient wound clinic for dressing changes for every 3 days and to follow and manage the device. The canister will also be changed by the wound clinic.</p>
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WOC specific medical & nursing diagnosis	WOC Plan of Care (include specific product used today)	Rationale (<i>Explain why an intervention is chosen; purpose</i>)
<p>Excision of the pilonidal cyst incision measuring 7.5cm x 3cm x 3.5cm. Incision to remain open and to close using a Negative Pressure wound therapy device</p> <p>Keep the surgical area/ NPWT area clean and dry.</p> <p>Increase mobility to decrease recurrence and decrease pain</p>	<p>Negative Pressure wound therapy device placed. Recommendation to change every 2-3days by the wound clinic. The canister is to be changed once a week or when needed. Teach the patient how to charge the NPWT device, how to look to see if the dressing is maintaining a seal and how to remove and discard the dressing and apply a wet to dry dressing if necessary. Dressing supplies sent home with the patient's mother.</p> <p>Teach hygiene methods such as wipe away from the wound vac. Teach the patient to continue to keep the area clean and shaved or to use a hair loss product to prevent the growth of hair follicles in this area.</p> <p>Encourage the patient to increase mobility to facilitate healing of the gluteal area. Pressure applied to this area may also cause more injury.</p>	<p>Potential benefits from NPWT include reduced incidence of infection, decreased edema, and decreased drainage to the incisional site.</p> <p>Pilonidal cyst are often caused when loose hairs penetrate the skin and become embedded forming a pocket of hair and skin debris.</p> <p>Increased risk factors for developing Pilonidal cyst include inactive lifestyle, excessive hair and are often formed in the gluteal region from prolonged sitting causing friction between the skin and the hair.</p>

What are the disadvantages of using this product(s)? What alternatives could be used and why?	Disadvantages of using an NPWT device on a holiday weekend for outpatient surgery is that someone has to be available to change and maintain the device if problems occur. Planning is essential in this case. The follow up appointment was made, the patient has information on how to troubleshoot and who to call if a problem arises. Another alternative could have been to do a wet to dry dressing and to teach someone to do that dressing until the outpatient appointment with the wound clinic.
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Develop one learning goal for each clinical day, document that on this form then share your goals with your preceptor.

Were you able to meet your learning goals for today? Why or why not?	I was able to investigate the insurance company to determine coverage of the NPWT device. I was able to apply the NPWT device and educate the patient on the use of the device, including how to charge and troubleshoot problems. I also showed the patient the phone number on the device if they have questions later. I was also able to teach the patient and mother how to do a wet to dry dressing if necessary. It was interesting for me to work in a more outpatient role. This is not an area I am familiar with but did learn
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	how to plan and focus for the outpatient setting.
What are your learning goals for tomorrow? (Share learning goal with preceptor)	My preceptor and I discussed what a quarterly prevalence was and how it is entered into a national database NDNQI to see where the facility rates at a national level with Pressure Injuries. We discussed how to obtain the data and how to enter it and what to do with the data once obtained. The next clinical day we will be doing prevalence and we will see every patient in the hospital, enter the data and see if any HAPI are present.

Number of Clinical Hours Today: 8

Care Setting: Hospital Ambulatory Care Home Care Other: Surgery

Number of patients seen today: 6 Preceptor: Julianne Cordes

Reviewed by: _____ Date: _____

****References are not generally required for daily journals**

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