

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

Daily Journal Entry with Plan of Care & Chart Note

Student Name: Megan Mae Hickey Day/Date: 7/11/23

Number of Clinical Hours Today: 8 Care Setting: Hospital Ambulatory Care Home Care Other: _____

Number of patients seen today: 4 Preceptor: Chizu Sakai Imoto

Journal Focus: Wound Ostomy Continence Combination Specify: _____

Directions: WOC nurses function as consultants and develop plans of care for other care givers as a guide to providing care in the WOC nurse’s absence. For this assignment, select one patient each clinical day. Provide assessment information and write a chart note. Using this information, develop a plan of care (POC) which directs care.

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. Provide thorough documentation on the patient encounter. Once you have completed the form, save the document by clinical date and preceptor. 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. See samples in course to assist you with this assignment.

<p>Today’s WOC specific assessment</p>	<p>Assessment includes a chart review. Identify PMH, HPI, labs, etc. Be sure to include data that supports the reason for the WOC nurse consult.</p> <p>The patient is a 92 year old male who was admitted left hip arthroplasty joint infection. He was taken to the operating room for a revision and placement of antibiotics. His past medical history includes heart failure, coronary artery disease, hypertension, and ulcerative colitis. His past surgical history includes colectomy with eventual construction of a K-Pouch and continent ileostomy. The patient’s laboratory results were all within normal limits. The WOC nurse was consulted for daily care of the K pouch.</p>
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Chart Note: Write a chart note for the medical record for this patient encounter. Be sure to include any physical assessment, interactions, and specific products that were used/recommended for use.

<p>The WOC nurse consultant/specialist note should begin with why you are seeing the pt; Initial visit for..., follow- up visit for..., evaluation and management of..., etc Then, describe the visit. Write in a manner others will be able to understand and be able to interpret your plan of care.</p> <p>Upon initial assessment of the patient, his stoma was intubated with a regular 30 Fr. Marlen catheter and placed to gravity drainage. As the patient has movement restrictions following surgery, it is his preference to remain intubated until he discharges home. The stoma is located in the right lower quadrant and is 1 1/8” in size. The mucosa is red and moist but there is a lesion noted on the 12 o’clock area of the stoma that appears to be related to some sort of trauma. The regular catheter was removed and a soft Marlen 30 Fr catheter was used in its place to provide comfort and allow for more flexibility of the system. The patient’s stoma was intubated without difficulty using lubricating jelly. Irrigation was performed with normal saline with no noted leakage around the catheter. 30 cc were instilled 8 times with prompt return of irrigation fluid and effluent. The effluent was thick to thin brown. The catheter was marked at approximately 15cm to assure proper placement. A face plate and baby nipple were attached to the catheter and secured with a Torbot belt. Multipore tape was utilized to secure the system. A split gauze was placed under the face plate to absorb and drainage and protect the skin. The catheter was reattached to gravity drainage and effluent was able to flow to drainage bag without</p>
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issue.

WOC specific medical & nursing diagnosis and concerns	WOC Plan of Care (include specific products used)	Rationale (Explain why an intervention is chosen; purpose)
<p>Identify specific problems or concerns. "Risk" concerns should be incorporated into the plan for actual problems/concerns.</p> <ol style="list-style-type: none"> The patient is at risk for dehydration as he has an ileostomy which produces loose effluent. The patient is also at risk for impaired mobility which could affect his ability to care for his K-Pouch independently. 	<p>Statements should be directive and holistic relating to the problem/concern.</p> <ol style="list-style-type: none"> The patient was encouraged to maintain adequate fluid intake to prevent dehydration. The nurses will also measure strict intake and output to keep track of his hydration status. The patient will mobilize safely with physical therapy and be sure to demonstrate proper care of the K-Pouch before discharging from the hospital. 	<p>Statements should explain why the intervention/directive should be followed. References are not required, unless utilized.</p> <ol style="list-style-type: none"> Proper hydration and monitoring hydration status will prevent dehydration. Since the patient is elderly, he is also at higher risk for dehydration. Since he has a history of heart failure, any fluid imbalance should be corrected with care. Proper mobilization will allow the patient to return to a baseline function in order to complete his normal activities of daily living such as emptying his K-Pouch.

<p>Identify each WOC product in use/identified in POC. State at least one disadvantage of the product. Identify an alternative to the product. Alternatives should be from a different category or classification. In other words, what could be used if the product was not available?</p>	<p>This section helps to communicate your product knowledge and critical thinking skills. Products should be available in the US.</p> <p>Face Plate – This product is very stiff and has the potential to breakdown skin if improperly placed. It is difficult to think of an alternative because I do not think there is one. Perhaps a skin barrier wafer could be utilized in some way if the face plate was not available.</p> <p>Torbot Belt – This product could pull the system to tightly against the skin. The alternative is not ideal but tape could be used instead.</p> <p>Baby Nipple – The disadvantage to this product is that it was being used in a manner that was not intended. A drain port that is wide enough could be used instead.</p> <p>Marlen Catheter – The disadvantage of the regular catheter is that it is not flexible and may cause discomfort to the patient if left in for a long period of time. The soft catheter is far more flexible and comfortable for the patient when left at constant drainage.</p> <p>Mefix Tape – This tape can be difficult to remove from its backing. Alternative tape could be</p>
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	Primapore from 3M that is also a multipore tape but does not have backing like Mefix.
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Develop one learning goal for each clinical day, document that on this form then share your goals with your preceptor.

What was your goal for the day? Were you able to meet your learning goal for today? Why or why not?	My goal from yesterday was to see a postoperative teaching lesson. Today, we did not get the opportunity to meet that goal but I think I far exceeded my goal by being able to assist with management of a K-Pouch.
What are your learning goals for tomorrow? (Share learning goal with preceptor)	Tomorrow, my goal is to see a postoperative teaching lesson.

Identify/describe thoughts related to the mini case scenario, anything you might have done differently, etc	
Reflection: Describe other patient encounters, types of patients seen.	During this clinical day, my preceptor and I saw the continent ileostomy, assisted 2 colleagues with 2 difficult wound vac changes, and saw a pediatric patient with moisture associated skin damage related to an extremely leaky feeding tube.

Reviewed by: _____ Date: _____

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