

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

Daily Journal Entry with Plan of Care & Chart Note

Student Name: Kristen Kangas AGPCNP-BC. Day/Date: 7/11/2023

Number of Clinical Hours Today: 8-4pm Care Setting: Hospital ___ Ambulatory Care ___ Home Care ___ Other: _____

Number of patients seen today: 7 Preceptor: Jennifer Brinkman

Journal Focus: 7: Wound

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.

Today’s WOC specific assessment	Patient is a 50-year-old female admitted for endocarditis and mitral valve abscess managed by the primary team. PMH of Stage 3 breast cancer (chemo no radiation), diabetes, diabetic gastroparesis, diabetic neuropathy, ESRD on IHD since 2/2020, uterine fibroids, hyperlipidemia, hypertension, and obstructive sleep apnea. Past surgical history includes AV fistula, breast cyst aspiration, dialysis cath, balloon uterine ablation, trigger point, tubal ligation, and uterine fibroid embolization. She was consulted for re-evaluate of her sacral wound. She was initially seen by WCCT on 7/5/2023 for stage 2 sacral pressure injury that was acquired. Pertinent labs include H/H 10.7/ 37.6 and WBC of 5.6.
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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>Initial visit: Evaluation and management of sacral wound.</p> <p>Patient is alert and oriented x 0. Over 60 minutes were spent with the patient, and patient was only able to verbalize “ouch” twice. Primary team and staff RN notified regarding her neuro status. Per staff RN patient received fentanyl and oxycodone. We suggested a neuro consult and deferred to primary team. Distracted patient by instructing and informing her on each step of dressing change. Patient was unable to verbalize the amount of pain she was in using the pain scale. WCCT was consulted regarding stage 2 sacral pressure injury. The old, Allevyn, foam dressing, was removed. The wound was cleansed with normal saline and then gently dried. The wound had partial thickness tissue loss (stage 2 pressure injury) and measured approximately 1cm (wound length) x 1.5 cm (wound width) x 0.2 cm (wound depth). The site assessment showed the wound was red and moist with small amounts of serosanguinous drainage noted without odor. Peri wound skin intact and normal for ethnic group. A new foam dressing, Allevyn foam, was changed, and a good seal was obtained.</p> <p>Plan: Cleanse wound and change dressing daily. Place split sponge around the FMS and change BID and as needed. Maintain Air turn & position (TAP) system. Turn patient every two hours using the TAP wedges avoiding pressure over the sacral region. Place on dolphin immersion surface. Follow up visit for evaluation and management of stage 2 pressure injury is warranted. WCCT will continue to follow up on patient status and WCCT should be consulted sooner if wound worsens.</p>
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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> <p>Impaired cognition/ safety:</p>	<p>Statements should be directive and holistic relating to the problem/concern.</p> <p>Q 2-hour neuro checks. Patient was not responding to painful stimuli and was very sedated.</p>	<p>Statements should explain why the intervention/directive should be followed. References are not required, unless utilized.</p> <p>Patient was A&O x 0 and had multiple lines/ tubing connected to her (AV Fistula, dialysis port, central line, and a broken right foot).</p>

<p>Identify each WOC product in use/identified in POC. State at least one disadvantage of the product. Identify an alternative to the product. <u>Alternatives should be from a different category or classification.</u> 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>Allevyn dressings.</p> <p>Alternatives include Allevyn life foam dressings, allevyn gentl border foam dressings, and a tegaderm form.</p> <p>Contraindication: third degree- burns. Allevyn products with oxidizing agents, such as hypochlorite solutions (Dakin’s), can break down the absorbent polyurethan component of the dressings</p>
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Develop one learning goal for each clinical day, document that on this form then share your goals with your preceptor.

<p>What was your goal for the day? Were you able to meet your learning goal for today? Why or why not?</p>	<p>My goal for the day was to become more comfortable in my new role. In my current role I am used to seeing patients in the outpatient setting in an office and communicating with patient via mychart message and phone calls etc. Seeing patients in WOC in the ICU was intensive and fast paced (which is something I was used too while I worked on a CT stepdown unit). I was able to meet my goals for the day and want to continue to feel comfortable in my new role.</p>
<p>What are your learning goals for tomorrow?</p> <p>(Share learning goal with preceptor)</p>	<p>My goal for tomorrow is improved decision making when selecting treatment and dressing choice for each type of wound. For example, if I have a patient with a stage 3 pressure injury, I want to know right away off the bat which options and alternatives I have.</p>

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Identify/describe thoughts related to the mini case scenario, anything you might have done differently, etc	Before performing any skincare, I want to always introduce myself and assess if the patient is A&O x3.
Reflection: Describe other patient encounters, types of patients seen.	I saw a couple of other patients all with unique history's including one with a stage 2 sacral injury and a patient with a DTI with a fungal component.

Reviewed by: _____ Date: _____

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