

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

**Daily Journal Entry with Plan of Care & Chart Note**

Student Name:    Kelsi Critzer    Day/Date:    9/15/23   

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

Number of patients seen today:    8    Preceptor:    P.Clay RN, CWOCN   

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><b>Today’s WOC specific assessment</b></p>	<p><b>Assessment includes a chart review. Identify PMH, HPI, labs, etc. Be sure to include data that supports the reason for the WOC nurse consult.</b></p> <p>3 y.o. male with a history of cerebral palsy with severe spastic quadriplegia, global developmental delay, prematurity, seizures, extensive bilateral cystic leukomalacia, spastic quadriparesis, status post tracheostomy, status post G-tube, and has multiple contractures. Pt admitted and underwent elective surgical procedure at which time adhesives were used to hold monitors and tubing in place.</p> <p>Surgical history includes Gastrostomy tube placement; Tracheostomy placement; Laparoscopic Nissen fundoplication (11/24/2020); pr chemodenervation one extremity 1-4 muscle (1/12/2023); pr chemodenervation one extremity 1-4 muscle (4/18/2023); and chg sono guide needle biopsy (4/18/2023).</p> <p>The patient is known to have very sensitive skin when it comes to adhesives and tape.</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><b>Reason for Consult:</b> New consult for patient with skin concerns from adhesives to the right face</p> <p><b>Assessment:</b> The patient was assessed with RN, P.Clay RN, CWOCN, and mother at the bedside. The right cheek initially presented with small semi-deflated blisters with dried serosanguinous drainage around the edges. The area was gently cleansed with a normal saline wipe and a small amount of bleeding was noted. The right face presents with pink open areas congruent to the shape of adhesives used in the OR, both on the right cheek and to presumably tape the eyes. Due to the hypersensitive nature of the patient’s skin to any adhesive material, a cover dressing was avoided. WMST recommends applying Medihoney gel to all open areas daily.</p> <p><b>Wound Care Plan:</b> Nursing to do dressing, continue local wound/incision care, continue to monitor skin, WOC nurse to follow as needed and Supplies left for patient.</p> <p>Right face wound care, daily:</p> <ol style="list-style-type: none"> <li>1. Cleanse with saline wipe</li> <li>2. Gently pat area dry</li> </ol>
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<b>why not?</b>	
<b>What are your learning goals for tomorrow?</b>  <b>(Share learning goal with preceptor)</b>	Next week I would like to see and care for G-tubes, as I am currently not very comfortable with them.

<b>Identify/describe thoughts related to the mini case scenario, anything you might have done differently, etc</b>	Any time the patient needs any adhesive material to monitor or secure a device, no-sting skin barrier film should be applied first to provide a barrier between the skin and adhesive.
<b>Reflection: Describe other patient encounters, types of patients seen.</b>	Multiple neonates with ileostomies that required pouch changes. Follow-ups on patients with existing colostomies to ensure they have supplies during their hospital stay and address any additional concerns they may have.

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

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