

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

Daily Journal Entry with Plan of Care & Chart Note

Student Name: Sandra Maceroni Day/Date: December 7, 2023

Number of Clinical Hours Today: Hospital

Number of patients seen today: 3 Preceptor: Jeanine Osby

Journal Focus: Ostomy

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>48 yr old male with history of GERD and Ulcerative Colitis who developed invisible high grade and low grade dysplasia in rectum. He underwent a Laparoscopic converted open total proctocolectomy with rectal mucosectomy, J-pouch, anal anastomosis and diverting loop ileostomy on 12/01/2023. Patient is seen inpatient for his second stoma lesson (which is a hands on lesson for the patient), as the first is mostly demonstration.</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>48 yr old male s/p TPC with IPPA and loop ileostomy. Seen by WOC nursing today for continued ileostomy education. This is his second lesson. Patient denies leakage but is having high ileostomy output of 2700 ml over 24 hours. Patient removed old pouch with adhesive remover. Back of pouch was evaluated for wear with undermining seen. Patient prepared the new pouch for application. Loop ileostomy in the RLQ, slightly rounded, measured at 7/8 x 1”, red and moist, slightly protruding, empty downwards. Mucocutaneous junction intact. Producing green liquid effluent. Peristomal skin intact, some yellow bruising noted. Abdomen is semisoft. Midline staples are clean, dry and intact. JP drain in LLQ with serosanguinous drainage.</p> <p>Patient pouched with Hollister New Image Cera Plus, cut to fit convex cut to fit flange, cut to 1” x 1 1/8”, Hollister Adapt CeraRing, and high volume output pouch. Pt did well with pouch change. Reviewed diet and dehydration prevention.</p>
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	<ol style="list-style-type: none"> 4. Measure stoma once per week for first 6 weeks, as stoma shrinks, may need cut opening smaller. Today cut to 1" x 1 1/8" as stoma measured 7/8 x 1" 5. Gentle Cleansing of peristomal skin with warm water 6. Pat dry skin dry 7. Replace new pouch, using one hand for warming and added heat pack. 8. Empty at 1/3 to 1/2 full 9. Can shower with pouch on or off 	<p>Leave about 1/8" of skin. May need to cut smaller as the stoma shrinks to protect skin</p> <p>If pouch is too full, it can pull and decrease wear time.</p> <p>Warming appliance allows for better adhesive to skin.</p> <p>Best time to shower is when ostomy is less active, first thing in morning or later in evening several hours after eating.</p>
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<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>Hollister New Image Cera Plus, cut to fit convex cut to fit flange, cut to 1" x 1 1/8" Disadvantage is -2 pc appliance can be more complicated than a one-piece appliance.</p> <p>Hollister Adapt CeraRing, makes pouch application more complicated and over time may not need it (if leaking is not a problem).</p> <p>High volume output pouch disadvantage- can become too heavy if not emptied properly and will need to change to smaller Hollister New Image pouch as output decreases.</p> <p>Alternative pouch is Hollister Premier drainable pouch cut to fit (one pc) with stomahesive paste.</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>Actually, I wanted to see urinary stomas and this did not happen. Twice we went to see a patient, one was off the unit, the other was seen first by another stoma nurse.</p>
<p>What are your learning goals for tomorrow? (Share learning goal with preceptor)</p>	<p>Would like to see more complicated stoma problems and an ileal loop or ileal conduit.</p>

<p>Identify/describe thoughts related to the</p>	<p>Would have liked to have been able to see more patients but teaching sessions are</p>
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mini case scenario, anything you might have done differently, etc	time consuming, then taking time with charting. I am satisfied with the care of this patient and would not have done anything different.
Reflection: Describe other patient encounters, types of patients seen.	New consult for leaking loop ileostomy from recovery for an outpatient surgery for an unrelated issue. Saw a patient for first loop ileostomy lesson for a patient I marked a couple days ago. Seems time was spent waiting for bedside nurses to finish care and then looking up patients other WOC nurses had seen, or patients were off the floor.

Reviewed by: _____ Date: _____

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