

11/30 #1

Daily Journal Entry with Plan of Care & Chart NoteStudent Name: Marina DeRosa Day/Date: 11/30/2024Number of Clinical Hours Today: 12Care Setting: Hospital Ambulatory Care Home Care Other Preceptor: Karen Francis, APN CWONClinical Focus: Wound Ostomy Continence

This assignment should be WOC focused and approached as both patient documentation and critical thinking development. Complete each section of the document. 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 no later than **48 hours** following the clinical experience day. See samples in the course Resource area to assist you with this assignment.

Reflection: Describe your patient encounters & types of patients seen.

I saw six patients today with my preceptor. While most of them were wound-focused, we saw one patient with a new colostomy. This patient is non-compliant and unwilling to learn colostomy care. Teaching and reinforcement, as per my preceptor, is continuing. Family is inaccessible. We spent approximately one hour with this patient talking about the ostomy care needs, teaching, and hands-on instruction on how to empty the colostomy bag. Another patient we assessed had unstageable pressure injuries with recent surgical debridements. Other patients seen had DTI to bilateral heels; two patients with stage 2 injuries to the sacrum, and the last patient with a stage 3. My preceptor was consulted to see a new patient to help assess the pressure injury risk and develop a prevention plan. The facility does have a standard protocol. We discussed how the protocol should be reinforced to facilitate accurate time management because she is expected to prioritize these patients.

Types of patients: New colostomy, varying pressure injuries stage 2,3, DTI and unstageable pressure injuries

WOC nurses function as consultants and develop plans of care (POC) for other care givers as a guide to providing care in the WOC nurse's absence. For this part, select one patient who is an example of the identified specialty hours for this clinical day. Write a chart note giving careful consideration to how the patient was assessed, the problems, and the rationale behind the plan of care. 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. Be sure to include any physical assessment, interactions, and specific products that were used/recommended for use. Write in a manner others will be able to understand and be able to interpret your plan of care.

Chart note:

The patient is a 67 y.o. male arrived from a Nursing Home related to sepsis. The patient is White, English speaking. Fitzpatrick Scale Type 2. The patient was admitted for same. The patient is referred for evaluation and treatment of community-acquired. Patient seen at bedside awake alert in no pain or discomfort.

Wound Location : sacrum
Type : pressure
Stage : unstageable
Size : 14cm x 9cm x 2.5cm
Wound base : 80% necrotic tissue and 20% granulation tissue
Undermining/Tunneling : undermining at 18:00 3 cm and 1cm at 23:00 and 13:00
Exudate : serous sanguineous

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Periwound skin : devitalized tissue at 18;00 13:00 tan to black in color
 Inflammation : moderate
 Odor : none
 Pain : unable to determine

Wound Location : right trochanter
 Type : pressure
 Stage : unstageable
 Size : 5.2cm x 4.8cm x 2cm
 Wound base : 90% necrotic tissue and 10% viable tissue
 Undermining/Tunneling : unable to assess
 Exudate : Fluctuant; Purulent discharge when palpated
 Periwound skin : indurated erythema and devitalized tissue
 Inflammation : moderate
 Odor : none
 Pain: unable to determine

Wound Location : left thigh
 Type : pressure
 Stage : 2
 Size : 2cm x 2cm x 0.2cm
 Wound base: pale pink
 Undermining/Tunneling : none
 Exudat : serosanguineous moderate
 Periwound skin: erythema
 Inflammation: Moderate
 Odor: none
 Pain: Unable to determine

The patient received AAOx2 ventilator assisted with tracheostomy. The patient receives Lopressor, a relevant medication that may delay wound healing. The patient is bed-bound with a low air loss surface (HillROm Centrella) positioned on the right side. Sacrum and heels offloaded. Patient rec's feeding of Glucerna 1.5 via PEG. Nutritional Status: Moderate malnutrition. The patient has a condom catheter to the bedside drain.

An Allevyn Life dressing with gauze was removed from the wounds.

Using the information from the chart note, develop a plan of care to be executed by other members of the healthcare team in your absence. Statements should be directive and holistic. Write as nursing orders.

WOC Plan of Care (include specific products used)

1. Continue pressure injury prevention interventions per policy
2. Wound care:

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Sacrum

Cleanse with NSS daily and pat dry
Apply skin barrier to periwound, let dry 60 seconds
Santyl to necrotic tissue
Cover with 4x4 gauze
Secure with Allevyn life dressing

Right Trochanter

Cleanse with NSS daily and pat dry
Apply skin barrier to peri-wound, let dry 60 seconds
Cover with 4x4 gauze
Secure with Allevyn life dressing

Left upper thigh

Cleanse with NSS daily and pat dry
Apply skin barrier to peri-wound and allow to dry 60 seconds
Cover with 4x4 gauze
Secure with Allevyn life dressing

3. Support surface: continue low air loss support

Recommendation:

Surgery consultation for right hip wound debridement and washout
Please contact WOC services with any questions or concerns

Describe your thoughts related to the care provided. What would you have done differently?

This patient is a vent, trach, PEG with hx of osteomyelitis to sacrum treated. Per history, the patient has many readmissions. The primary care team should consider a discussion of the goals of care. A nutrition consult may also be regarded as the patient is on continuous PEG feedings. Also, I would discuss the patient's wounds with the family and the expectations for healing the wound.

Goals**What was your goal for the day?**

My goal was to learn how a WOC nurse manages her day. My preceptor is very organized and carries a small notebook to document notes and thoughts on patient care, which is an idea I may be instituting into my practice. An agenda for the day prioritizing work

What is/are your learning goal(s) for tomorrow?

I would like to see a more complicated wound patient and how the WOC nurse assesses and develops the plan.

Reviewed by: K. Francis Date: 11/30/2024

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