



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

Daily Journal Entry with Plan of Care & Chart Note

Student Name: Alexis Faria Day/Date: January 8th, 2025

Number of Clinical Hours Today: 8

Care Setting: Hospital Ambulatory Care Home Care Other

Preceptor: Jennifer Brinkman

Clinical 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 course Resource area to assist you with this assignment.

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

On this day, was able to round with the wound care team. Saw 4 patients with my preceptor. Able to see and assess an acquired evolving deep tissue injury. Preceptor asked a lot of questions and reviewed my suggestions to ensure we were on same page for staging and dressing choice. Was able to see the process of escalating a situation to management as patient family was upset by finding. Patient seen with erosion from J-tube leakage and treated with stoma powder dusting and barrier paste application. Attempted to see a patient who was showing severe agitation and refused care at that time. Another patient seen with multiple areas of concern including buttocks, folds, and multiple skin tears. Patient had a stage 3 wound on buttock. Reviewed support surfaces and wound care products available for use. Also saw patient that I chose for journal today – will review below.

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 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:

Patient recently admitted from another institution with full thickness nonhealing diabetic foot ulcer to plantar surface. Patient is 61 year old male. Past medical history includes lymphedema, diabetes mellitus type 2, chronic kidney disease with 3x/week dialysis. Patient states he has had the wound for 1.5 years and gets weekly wound care at the facility he is currently residing at. Patient with chronic osteo and Charcot foot. Endorses occasional pain with ambulation. Patient is noncompliant with offloading and is frequently walking and weight bearing to affected foot. Does wear compression stockings daily. Per patient, "they want to amputate, but I want to wait until there is no other choice". Patient does have past surgical history of amputation of left 4th and 5th toes. Spent time discussing patient barriers to healing and expectations for wound care. Patient agreeable to assessment and dressing change at this time. Old dressing removed and noted to have large amount of purulent exudate. No odor noted. Palpable pedal pulses. Wound cleansed with normal saline. Wound bed is red with yellow base. Edges are intact. Periwound is dry with thick skin. Inferior aspect with moist, macerated tissue. Measurements taken and wound measures 14 cm x 11 cm x 0.6 cm. Hydrofera blue cut to wound size, moistened with saline (excess rung out) and placed to wound bed. Skin sealant used to protect periwound skin. Abdominal pad used over Hydrofera blue and secured with kerlex wrap. Unable to re-apply compression stockings over dressing at this time and patient requests they be left off for the time being. Informed unit nursing. Stressed importance of offloading foot for wound healing, patient verbalized understanding.

(Save the document by clinical date & preceptor last name before submitting to your dropbox each clinical day)

Journals should be submitted to your dropbox no later than **48 hours** following the clinical experience day.

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)

Daily wound dressing changes to include:

- a. Remove old dressing
- b. Cleanse wound with normal saline, gently dry
- c. Cut Hydrofera blue to wound size, moisten with saline, ring out excess, apply to wound bed
- d. Cover with ABD, secure with kerlex roll gauze
- e. Change daily or as needed for color change from blue to white

Strict offloading of affected leg

Compression daily with compression stockings

Monitor blood sugar

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

Care provided was excellent and I don't believe I would have done anything differently. Preceptor took the time to sit and discuss the plan of care with the patient. She thoroughly reviewed the patient history and goals of care. She was open and honest about patient barriers to healing and possible outcomes of wound healing.

You should have a learning goal for each clinical day. What was your goal for the day? Was it met? Why or why not?

Goals
What was your goal for the day?

To see, stage, and properly recommend wound dressings. Goal was met. The preceptor gave me multiple opportunities to stage and confirm with her. She also listened to my recommendations for wound care prior to informing me what she would use and the rationale. Good feedback was received.

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

Goals would be to continue to see wounds and review different dressing types and effects. Would like to continue to see complex wounds.

CRITICAL ELEMENTS	Completed	Missing
Medical record note reflects that of a specialist:		
• Identifies why the patient is being seen	✓	
• Describes the encounter including assessment, interactions, any actions, education provided and responses	✓	
• Includes pertinent PMH, HPI, current medications and labs	✓	

(Save the document by clinical date & preceptor last name before submitting to your dropbox each clinical day)

Journals should be submitted to your dropbox no later than **48 hours** following the clinical experience day.

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

• Identifies specific products utilized/recommended for use	✓	
• Identifies overall recommendations/plan	✓	
Plan of Care Development:		
• POC is focused and holistic	✓	
• WOC nursing concerns and medical conditions, co-morbidities are incorporated	✓	
• Statements direct care of the patient in the absence of the WOC nurse	✓	
• Directives are written as nursing orders	✓	
Thoughts Related to Visit:		
• Critical thinking utilized to reflect on patient encounter	✓	
• Identifies alternatives/what would have done differently	✓	
Learning goal identified	✓	

Reviewed by: _____ Date: _____

(Save the document by clinical date & preceptor last name before submitting to your dropbox each clinical day)

Journals should be submitted to your dropbox no later than **48 hours** following the clinical experience day.