

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:           Tuesday January 21st          

Number of Clinical Hours Today:   10  

Care Setting: Hospital  Ambulatory Care  Home Care  Other

Preceptor:           Adam Shaw          

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.

Patients seen today included another stoma marking pre-op which was complicated by multiple fistulas and current ostomy leaving only 1 quadrant for marking. Multiple appliance assessments. Patient with granulomas causing appliance leakage and needing to be refit, silver nitrate used to granulomas by preceptor. Pouching of a j-tube due to leakage.

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:

69 year old male patient with large loop ileostomy with peristomal hernia. Appliance change needed due to continued leaking. Patient with history of CVA, COPD, recurrent diverticulitis with SBO and s/p diverting loop ileostomy (2019), stomal prolapse, HTN. Patient abdomen semisoft and with multiple scars. Appliance removed with Sensi Care wipes. When assessed in sitting position there is a dip at 3 o'clock. Stoma is large, red, and moist. Peristomal skin is intact as well as mucocutaneous junction. Patient with large peristomal hernia. Soft brown liquid output. Patient currently with 1-2 day wear time. Site care provided with warm water and soft cloth. Area thoroughly dried. Hollehesive wedges were used to fill 3 o'clock crease. Stomahesive paste used to caulk. Flexible pouch needed for adherence due to peristomal hernia. Coloplast SenSura one piece, flat, drainable pouch used and Mefix tape used to frame for additional support. Discussed NuHope Hernia belt with patient and provided ordering instructions.

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)

Wear time goal: 3-4 days

##### Skin care:

- a. Use Convatec Sensi Care adhesive remover wipes to gently remove pouch
- b. Cleanse peristomal skin with warm water and soft cloth

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- c. If any denuded or irritated skin – use ConvaTec stomahesive powder and brush off loose/excess powder. Then use 3M cavilon to peristomal skin – allow to dry

**Pouching:**

- Use Hollehesive wedges to petal and fill the 3 o'clock crease. Stomahesive paste to caulk.
- Apply coloplast SenSura one piece, flat, drainable pouch
- Hold warm hands or hot pack to assist with adherence for 60 seconds
- Cut Mefix tape in to 4 strips and round corners, use to frame barrier

Use NuHope hernia belt for support

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

I would have helped the patient choose their belt and assisted with the ordering process. I would have also given a demonstration on how to apply powder. I also believe I have seen a specific Coloplast product for patients with peristomal hernias that has a barrier with almost a star shape that may have worked for this patient – so I may have reached out to Coloplast to see about sending the patient some samples.

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?**

Goal for the day was to do additional markings and to see more ostomy trouble shootings. My goal was met. I was able to see tons of ostomy patients and troubleshooting of pouching issues. Also was able to mark and tattoo an additional patient.

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

Goals for tomorrow would be to see a patient with a urostomy and maybe remove stents or see an irrigation of a stoma.

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	✓	
• 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	✓	

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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: \_\_\_\_\_

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