



R. B. Turnbull Jr. M.D. WOC Nursing Education Program

Daily Journal Entry with Plan of Care & Chart Note

Student Name: H. Alexis Seris Espinal _____ Day/Date:
6/5/2025_____

Number of Clinical Hours Today: 8_____

Care Setting: Hospital _____ Ambulatory Care _____ Home Care _____ Other _____

Preceptor: Sarah Weisz _____

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.

Today a total of 5 patients were seen on the inpatient units. These patients primarily had Ostomy care needs. Today we completed a stoma marking for potential revision of an existing ileostomy. We also saw a post operative day 1 loop colostomy for leakage to their pouch. We performed intubation for a End Ileostomy for the patient symptom relief and decompression. Then we performed colostomy stimulation of transverse loop colostomy. We followed up with both of these patients an hour later to see if output has occurred. The last patient was a pouch change and provide supplies for a patient with an established end colostomy.

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 beginning with a brief, focused history and history of present illness, including why you are seeing the patient. Then, describe the visit including any physical assessment, interactions, interventions, and evaluations. Complete a Braden Scale assessment if this was an inpatient encounter. Identify any specific products used or recommended for use. Remember, this note reflects all that you *did* at your visit, the plan of care reflects your direction/orders *after* the encounter to be performed in your absence.

Chart note:

Braden Risk Assessment Tool	
Sensory Perception	4

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Moisture	3
Activity	3
Mobility	4
Nutrition	2
Friction/Shear	3
Total	19

Stoma Site Marking of All 4 Quadrants:

Consulted for stoma marking of all 4 quadrants on abdomen for Ileostomy placement on 31-year-old male. PMH of Crohn's Disease and Sacroilitis. Pt has had a Total Colectomy with End Ileostomy currently placed in RLQ from May of 2024. Old colostomy site noted to LLQ from 2023 with history of infection. Reviewed H&P.

First encountered Pt in sitting up in semi-flower position in bed. Explained role and reason for visit. Patient agreeable to visit and stoma marking in all quadrants. Patient able to sit up to left side of bed, lie down and stand up independently.

Provided Pt with privacy and covered penile area with blue disposable chuck pad. Instructed Pt to sit up straight, lie down, and stand up. Felt for end of Pt's ribs bilaterally and marked with surgical marker. Assessed where nipple line meets to rectus muscles and marked with surgical marker. Next, assessed two finger breaths from Pt's midline and umbilicus. Scar tissue noted to midline from old surgical incision site. Instructed Pt to cough and felt for rectus muscle. Repeated Instruction for Pt to cough x3 and identified rectus muscle in RUQ, LUQ and L mid lower L quadrant. Repeated assessment with two finger breaths away from midline. Marked in X with surgical marker in RUQ, LUQ and mid lower left abdomen. LLQ not appropriate at this time r/t concave scarring from previous colostomy site. All marks were applied with Pt permission and covered with Tegaderm dressing. Explained to Pt these marks will be maintained until surgery. Pts prefers stoma site in RLQ as 1st choice. 2nd choice is the mid lower left abdomen.

Time spent with patient 40 minutes with Sara Weisz BSN, RN CWOCN and Adam Shaw BSN, RN, CWOCN.

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)

N/A at this time.

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

The patient was not feeling well at this time. The only aspect I can think of doing differently may have been to come back about 30 minutes to an hour later to allow the patient to feel better. As the marker was not Imminent or urgent.

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?

My goal for today was to preform ostomy procedures such as intubation and pouch changes. This goal was met as we performed intubation to an ileostomy and colostomy stimulation in which requires catheter intubation. We also provided pouch changes and supplies to each of the patients.

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

Tomorrow, I goal I have is to follow up with the stoma marking ostomy patient for a postoperative day 1 visit.

For instructor use only. Do not remove or edit:

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	✓	
• Completes Braden Scale for inpatient encounter	✓	
• Includes pertinent PMH, HPI, current medications and labs	✓	
• Identifies specific products utilized/recommended for use	✓	
• Identifies overall recommendations/plan	✓	
Plan of Care Development:		

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• POC is focused and holistic	✓	
• WOC nursing concerns and medical conditions, co-morbidities are incorporated	✓	
• Braden subscales addressed (if pertinent)	✓	
• 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: _____

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