



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

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Daily Journal Entry with Plan of Care & Chart Note

Student Name: Tara Doud Day/Date: 06/03/2025

Number of Clinical Hours Today: 8

Care Setting: Hospital Ambulatory Care Home Care Other

Preceptor: Jessica Lawson

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.

We saw 8 patients all with ostomies of some sort. The patients come to the outpatient clinic for either a yearly check-up or when they have difficulties with their stomas or ostomy equipment. Some of the patients had poorly fit barriers that was causing skin maceration and some just needed to have their stomas looked at. One patient had an ileostomy, and its original marking had to have the surgeon stretch the small intestine so far that his output was so high he needed to come back to the hospital for dehydration. He was set for surgery where a graft would be taken from his leg to fix a fistula. WOC nurse marked a spot for a new stoma, below the site for the ileostomy. He had a mid-line incision that he wanted the stoma to be far from because he had a stoma there at one point and the barrier was finding its way into the midline incision (it's more of an indent now). This made it difficult to make a seal. I wish I would have put him as my journal entry patient because his case was interesting. But I did not note the exact products used for him, so I decided to go with a different patient. I noticed that the RN would do her best to replicate the patient's at home procedure (e.g. putting the Cera Ring directly on the skin or on the barrier per patient preference) which I appreciated.

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:

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Tara, you do need to write an actual note so take what is under the plan of care & put it here. Then, for this journal, you will write the instructions for the patient to follow when they return home. For inpatient, you will write instructions for how the staff will do the dressing or pouch change. Plans are succinct & action verb oriented...

66-year-old female patient with a history of chronic interstitial cystitis with hematuria had a laparoscopic cystectomy in March of 2023. She was seen in the outpatient clinic for skin maceration and suspicion of a fungal rash. Upon examination, the patient's ileal conduit barrier cut too small for the stoma size. She was using a 2 ¼" Hollister New Image Flat Flange cut to ½", Cera ring SLIM directly on the skin to fit around the stoma with a urostomy pouch. She had been using a flat barrier even though her abdominal area is soft. She had been prescribed fungal cream and the WOC nurse suggested continued use. We measured the correct size of the stoma and retrieved a 1 ¾" Hollister New Image convex Flange barrier from the back room. We cut the stoma barrier to fit the stoma size (7/8"). We dusted the skin with the anti-fungal powder and stoma adhesive powder followed by skin prep which is the patient's usual practice. We used the Cera Ring SLIM and placed it directly on the skin. The WOC RN placed an order to the supplier for a convex Hollister barrier. We also brought the patient a belt to help keep the system in place.

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)

1. To remove your old pouch, use an adhesive remover generously on the adhesive of barrier pouch.
2. Cleanse around the stoma area with soap and water, don't use soap with lotions or scented soap
3. Measure the stoma and cut the correct barrier size.
4. Dust the anti-fungal and ConvaTec stomahesive powder around the site
5. Stretch the moldable cera ring to fit the stoma size
6. Place the cera SLIM barrier ring directly on the skin
7. Peel back the adhesive on the barrier then snap the pouch into place atop the barrier.

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

The only thing I would have done differently is to have had the patient measure the stoma herself to make sure she knows how to measure it if the stoma size changes. I think it is important that patients have autonomy to know how to correct changes. Pt was also a retired nurse, so I do not think this would be an issue for her. Good idea

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 have a refresher on what I learned about ostomies in our course work. I definitely accomplished that goal!

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

To learn about pelvic floor testing and what its abnormalities can diagnose.

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For instructor use only. Do not remove or edit:

CRITICAL ELEMENTS	Completed	Missing
Medical record note reflects that of a specialist:	<i>In wrong place</i>	
<ul style="list-style-type: none"> Identifies why the patient is being seen 	✓	
<ul style="list-style-type: none"> Describes the encounter including assessment, interactions, any actions, education provided and responses 	✓	
<ul style="list-style-type: none"> Completes Braden Scale for inpatient encounter 	<i>N/A</i>	
<ul style="list-style-type: none"> Includes pertinent PMH, HPI, current medications and labs 	✓	
<ul style="list-style-type: none"> Identifies specific products utilized/recommended for use 	✓	
<ul style="list-style-type: none"> Identifies overall recommendations/plan 	✓	
Plan of Care Development:		
<ul style="list-style-type: none"> POC is focused and holistic 		✓
<ul style="list-style-type: none"> WOC nursing concerns and medical conditions, co-morbidities are incorporated 		✓
<ul style="list-style-type: none"> Braden subscales addressed (if pertinent) 		✓
<ul style="list-style-type: none"> Statements direct care of the patient in the absence of the WOC nurse 		✓
<ul style="list-style-type: none"> Directives are written as nursing orders 		✓
Thoughts Related to Visit:		
<ul style="list-style-type: none"> Critical thinking utilized to reflect on patient encounter 	✓	
<ul style="list-style-type: none"> Identifies alternatives/what would have done differently 	✓	
Learning goal identified	✓	

Reviewed by: Patricia A. Slachta Date: 6/6/25

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