

**Daily Journal Entry with Plan of Care & Chart Note**Student Name: Jessica Whelen Day/Date: 7/7/2025Number of Clinical Hours Today:     Care Setting: Hospital  Ambulatory Care  Home Care  Other Preceptor: Kerry ShermanClinical 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 in Dr Spivak Clinic the patients I encountered were very interesting. The first patient in the clinic was an older gentleman who was experiencing pelvic pain, as he describes as a corn cob sensation or hot poker. His past medical history included multiply back surgeries stemming from a farm accident in which he was speared by a bull an inch from his rectum. He was very frustrated with the course of his medical management. Dr. Spivak devoted a considerable amount of her consult time to providing the patient with therapeutic listening. I was impressed with her amount of patience she had. The next two patient had prolapse, one was a rectal prolapse, and the other was a enterocele prolapse. The last patient was a postpartum woman who sustained an obstetric anal sphincter injury during childbirth. This injury has been cause the patient significant pain during defecation. I was able to observe this patient have a transrectal ultrasound. This procedure is used to assess the anal sphincter muscle. With this test the Doctor is able to view the different layers of the rectal muscle and is able to identify defects. After Dr Spivak completed a DRE, she was able to identify the muscle that was causing pain. Thankful the patient was not experiencing fecal incontinent. Dr Spivak was very encouraging that with pelvic floor therapy the patient would be able to tone and strength her rectal muscle to relive her pian. The next procedure the patient had completed was a anorectal manometry. Dr. Spivak requested this test to obtain baseline biofeed back for therapy.

**Chart note:****Manomerty**

This is a test used to assess the pressure and how well the anal/rectal muscles work. This test is use to find the underlying cause of constipation or fecal incontinence. The test for the strength of muscle and how the muscle relax after bowel movement. The test also assesses rectal sensation and the neural response.

The procedure is completed by inserting a thin flexible tube or catheter in to the rectum that has a sensor and a balloon that can be control by the Doctor during the exam. The balloon will be inflated and deflated and the

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patient will be asked to to complete different actions, such as squeezing, pushing and relaxing while the machine measure the different pressure. The results can be used to diagnosis disease such as Hirschsprungers. Surgeons with request this exam to be done to assess how the rectum has healed after rectal injury, in some case before patient have ostomy reversals this test will be completed to assess the level of success a patient may have when continuity is resorted.

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

To survive first day of clinicals and enjoy the learning experience. Which I learned more than I thought I would

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

The next day will be my first day in wound. My goal is to get familiar with my preceptor and the hospital formulary.

**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:		
• 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:		

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• 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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