

**Daily Journal Entry with Plan of Care & Chart Note**

 Student Name: Aislinn Van Tyne Day/Date: Tuesday June 17, 2025 **Resubmit Received 7/26/2025**

 Number of Clinical Hours Today: 7

 Care Setting: Hospital  Ambulatory Care  Home Care  Other 

 Preceptor: Helen Shubsda

 Clinical Focus: Wound  Ostomy  Continence 
**Reflection: Describe your patient encounters & types of patients seen.**

We saw a patient with multiple **butt** wounds and MASD which I expanded upon below. A cancer patient with a small wound on their coccyx which the APRN ordered Aquacel, Hydrogel, and an Allevyn on. A sternum wound that was draining, which we cleansed with saline and placed silver alginate and an Allevyn on. A patient with a stage 4 pressure injury on the buttock and an unstageable pressure injury on their coccyx, we assessed the wounds and placed a dressing on the stage 4, the WOC nurse team will be returning later to place a NPWT on the unstageable.

**Chart note:**
**Braden Risk Assessment Tool**

Sensory Perception	3
Moisture	2
Activity	1
Mobility	1
Nutrition	3
Friction/Shear	2
Total	12

Patient is a 59 year old female with PMH of HTN, gallstones, HTN, OA, current 0.5 pack per day smoker, marijuana use last use 6/1/25, urinary retention-pt states that they self-catheterize.

BP 129/77, Pulse 84, Temp 97.8 F temporal, Respirations 18, SpO2 98% on room air

Assessment: patient is AO x4, +

Patient is being seen for a consult post stent removal following recurrent obstructing stones. Patient states that they had the wound **What wound? Are you consulted for a wound, skin irritation? Be more specific.** when they went into the facility where they currently reside **but that their dressings were not being changed twice daily. Your statement indicates malpractice. Should this be in a medical record?**

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Upon arrival patient is turned on their side with heel boots on and requests that when we are done we turn the in the opposite direction. There is a comfort glide sheet under the patient to also aide in turning and pulling the patient up in bed. **Should a patient be “pulled”?** The bed is also equipped with an Isotour blower.

#### Right Buttock

Patient has a healing stage three pressure wound on their right buttock, Wound base is red moist and peri wound is scar tissue, wound is irregularly shaped, the wound is 0.6cm x 0.6cm x 0.1 cm, with no drainage present. The wound was cleansed with bath wipes and a 1” x 1” square of Aquacel was placed on the wound due to scant serosanguinous drainage from the wound and an Allevyn was placed on top. **Is this type of dressing supported by evidence for use in this type of wound?**

#### Left Buttock

Stage- unstageable pressure injury

Site Assessment- full thickness tissue loss, base of ulcer is covered by slough tissue in wound bed.

Tan and Red, moist, irregularly shaped **Drainage?**

Peri wound assessment- scarred.

5 cm x 2 cm x 0.3 cm

Cleansed with normal saline and dressed with Hydrogel, a 6 cm x 2.5 cm rectangle of Aquacel and covered with an Allevyn.

#### Lower abdominal fold

Site Assessment- Maceration, Pink, Hyperpigmentation

Peri wound assessment- moist.

Shape- linear

Drainage amount- none

Odor- none

Wound was cleansed with bath wipes and Coloplast Interdry was reapplied in the fold.

#### Right breast, lower, anterior

Site assessment- Maceration and Hyperpigmentation, small areas of partial thickness skin loss

Peri-wound assessment- Moist

Shape- linear

No drainage or odor

Wound was cleansed with bath wipes and Coloplast Interdry was reapplied under breast.

The patient noted that **voiced** during treatment of the buttock wounds they experienced some discomfort, **Did the voice such after you were finished or during each treatment? How was the discomfort managed?** pt's floor RN was at bedside to assist with rolling and to administer pain medications per order. **Identify by name, when possible.**

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**WOC Plan of Care (include specific products)**

Bilateral buttock:

-Hydrogel, Aquacel, Allevyn, Normal saline

-Cleanse buttock with normal saline, gently dry, then apply Hydrogel to the yellow/tan portion of the wound and apply Aquacel over top and cover with Allevyn. Change daily and PRN. *For clarification, was hydrogel used on right buttock or are you adding it here in the POC?*

Abdomen/Breasts:

-Interdry

-cleanse skin and pat dry (do not rub), apply a single layer of Interdry fabric in the skin fold, with at least one edge being in the base of the fold. Smooth the rest of the fabric over the skin, removing any creases, make sure to leave at least 2in of fabric exposed from the skin fold. (Secure the fabric by either placing under a large skin fold, with a small amount of skin friendly tape or by tucking under clothing) Remove the Interdry before bathing or getting wet, after drying off reuse. Remove by gently separating the skin fold away and remove.

-Utilize Tru-View heel protectors to BLE or place a pillow under calves, while in bed to off load heels.

-Turn every 2 hours, to offload coccyx/ischium, if needed use turning wedges

-While in the hospital utilize Isotour blower on bed to maintain low air loss

-Consult nutrition to optimize wound healing

-Use a seating cushion for when sitting in a chair to decrease pressure on bony prominences *You are the specialist. Be specific. Apply air seating cushion to chair. Up in chair for meals at one hour increments.*

*What about smoking?*

**-Upon discharge you need to follow up with an outpatient wound care provider to monitor your wounds. Is the pt being discharged soon? What referral should made for discharge planning?**

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

We were able to treat the patient's existing wounds in a manner that will help the patient to succeed. They have all the tools at their bedside to make it easier for the nursing team to help them heal and to prevent further skin breakdown. Other than pain control prior I would not have done anything differently.

*Refer to comments above.*

**Goals**

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

To learn from the wound nurse practitioners, yes I learned a lot from the wound APRNs and I am excited to learn more tomorrow.

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

To learn more about wounds and to see some more complex patients compared to rounding with the RNs.

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

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

	<i>comments</i>	
<ul style="list-style-type: none"> <li>Identifies alternatives/what would have done differently</li> </ul>		X See comment s
Learning goal identified	X	

*Hi Aislinn- see my notes throughout this journal. Please update based on feedback and previous feedback to construct this journal to meet satisfactory status. As this is your 5<sup>th</sup> wound submission, make sure to pull together all concepts. Try to be as clear and as objective as possible.*

*Reach out with any further questions – I'd be happy to further review anything with you, just let me know.  
-Mike*

Reviewed by: Mike Klements received 6/18/25 Date: 6/25/25

**Reviewed by Kelly Jaszarowski 7/28/2025**

**Note my comments throughout. Chart note has improved. Perhaps, this format serves your documentation better and can be used in all WOC encounters. Continue to strive to develop a directive, holistic POC.**

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