

Daily Journal Entry with Chart Note & Plan of CareStudent Name: Mara Michalski Day/Date: 4 10/9/2025Number of Clinical Hours Today: 8 Number of patients seen 4Care Setting: Hospital Ambulatory Care Home Care Other Preceptor: Shellie BushClinical 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, and any additional activities.

4 patients were seen today. A male patient here for complicated UTI, being seen for a stage 2 wound on the coccyx. Due to incontinence, zinc oxide barrier cream was placed and the patient was offloaded with wedges. A female patient with a new J tube had excessive leakage around the site causing excoriation of skin around her LLQ and pain. The skin was cleansed and zinc barrier cream and stoma powder were used on the affected skin and due to the amount of continuous leakage around the tube site, kerlix gauze was placed underneath the tube and the surgical team was notified of leakage and consider stopping tube feeds or see if the patient is a candidate for TPN instead. A male patient who follows with the outpatient wound clinic for stage 4 left ischial and right trochanter was seen inpatient. The wounds were cleansed with normal saline and packed with Hydrofera blue and covered with Mepilex. A patient was seen post op Colostomy creation for assessment of the stoma and education. The patient had extreme anxiety and was crying and screaming during the teaching session, stating she was overwhelmed with the various choices of pouches and ways to place her pouch. She was fit for a 2 piece convex pouch with stomal powder applied around the stoma.

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. 1. select one patient who is an example of the identified specialty hours for this clinical day. 2. Write a chart note beginning with a brief, focused history and history of present illness, including why you are seeing the patient. 3. describe the visit including any physical assessment, interactions, interventions, and evaluations. 4. Complete a Braden Scale assessment if this was an inpatient encounter. 5. Identify any specific products used or recommended for use. Remember, this note reflects all that was **done** during the visit.

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The plan of care reflects your direction/orders to another care provider *after* the encounter to be performed in your absence.

Chart note:

This female patient was seen at bedside, sitting up in the chair. Hx of colon cancer and J tube placement. Tube feedings running through J tube. Patients current dressing of several ABD pads taped to abdomen were removed and redness and maceration of the LLQ were noted, where clear, yellow tinged liquid was leaking continuously around the J tube site, down the skin. The patient states the pain is 8/10. The wound is cleansed with saline moistened gauze and gently patted dry. A thin layer of Triad cream was applied to protect the skin followed by stoma powder. Kerlix fluff was then placed under the J tube to absorb any leakage. An ABD pad was applied over the tube insertion site and taped on non-effected skin. The surgery team was notified right away of the extreme leakage, and inquiries were made if feeding should be halted or if the patient was a candidate be temporarily placed on TPN.

Braden Risk Assessment Tool

| | |
|--------------------|----|
| Sensory Perception | 4 |
| Moisture | 1 |
| Activity | 3 |
| Mobility | 3 |
| Nutrition | 3 |
| Friction/Shear | 2 |
| Total | 16 |

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)

Orders:

- Remove old dressing.
- Cleanse skin with saline moistened gauze and pat dry.
- apply pea sized amount of Triad cream on wound bed and spread thinly to cover affected skin. Apply stoma powder on top of Triad cream.
- Fluff Kerlix under the J tube.
- Cover drain site under effected skin.
- Change every 2 hours or as needed due to excessive drainage.

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

I think this was a hard situation due to the large area of maceration and constant leakage. I think it was appropriate that the surgery team was paged right away, because this level of drainage was abnormal. The main goal was to protect the skin from further moisture so I think Zinc barrier cream (Triad) was a good choice along with the stoma powder to make a strong barrier. The Kerlix will absorb the gauze. Changes every 2 hours is needed due to the level of drainage that was taking place to evaluate of the Kerlix needed to be changed.

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 was to see more wounds and get practice in treating them which I did. I was able to see a leaking J tube and see the Wound Team escalating a concern.

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

I will like to continue using a variety of wounds and becoming familiar and comfortable in my assessments and treatments.

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 | ✓ | |

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|--------------------------------------------------------------------------------|---|--|
| 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: | | |
| • 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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