Cleveland Clinic

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

Daily Journal Entry with Chart Note & Plan of Care

Student Name: Sherrie Powell Day/Date: Wednesday 10/08/2025

Number of Clinical Hours Today: 8 Number of patients seen **4**

Care Setting: Hospital X Ambulatory Care ____ Home Care ____ Other ___

Preceptor: Denise Santos

Clinical Focus: Wound ____ Ostomy ____ Continence X

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.

My clinical day began with 4 consults requesting wound care recommendations on patients in the acute care setting. Each patient seen in person today had sacral or buttock wounds that required validation to determine if they were pressure injuries or other skin conditions, as well as treatment recommendations. The 1st patient seen today needed recommendations for a fungating tumor on her breast and a validation for a suspected pressure injury (SPI). I took into consideration a suggestion you had given me previously about using silicone for fragile tissue located on these types of tumors, and I used Mepitel-one as a contact layer before adding Dakin's moistened gauze dressing. The 2nd, 3rd, and 4th patients had referrals for validations for (SPI) and consults for dressing recommendations for the wounds. One of the patients had incontinence-associated dermatitis, and the last two patients had pressure injuries that appeared to have deteriorated in the presence of moisture, but incontinence was not the issue. They were both bariatric patients with moisture issues on the groin and coccyx. The last half of the day, we spent validating suspected pressure injuries to determine if they were present on admission or if they were hospital-acquired/unit-acquired. We went through the hospital system's criteria for determining acute skin failure and discussed how it contributes to skin breakdown, rather than pressure as a component of skin breakdown.

Types of patients: incontinence-associated dermatitis, moisture-associated skin damage, sacral ulcer, cancerous tumors

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,

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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.

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

Chart note:

Braden Risk Assessment Tool

Sensory Perception	2	Q4 hour & PRN pressure injury checks
Moisture	2	Clean with soap & water; protect skin with Vitamin A&D ointment
Activity	2	Suspend heel with heels up
Mobility	2	Q2 hour turns; limit time on back
Nutrition	4	
Friction/Shear	2	Use a bed sling under the patient to move and reposition; remove after use
Total		

Patient is a 72-year-old male admitted for urinary tract infection. Patient with past medical history of coronary artery disease (CAD), myasthenia gravis, chronic foley catheter, anemia, A-fib, rectal cancer, diabetes mellitus, and tracheostomy. WOC consulted for “suspected pressure injury, left buttock, previously identified as a friction injury that is now deteriorating,” and evaluation for Flexi-seal. Greeted the patient while in bed and explained the WOC role. Patient is non-verbal at baseline; family is at bedside to give consent for evaluation. Scattered areas of red, shiny epithelial tissue loss on the bilateral buttocks and the bottom of the scrotum. Per the family, the patient started having diarrhea after starting antibiotics 2 days ago for the UTI. On review of the chart, the patient had 5 liquid bowel movements in 24 hours. This patient does not meet the criteria for flexi-seal insertion due to the patient’s history of rectal cancer. Per the colorectal progress note, the patient is scheduled for abdominoperineal resection on October 28th, 2025. WOC recommends cleaning the bilateral buttocks, groin, coccyx, and scrotum with soap & water, drying the area thoroughly, and applying Vitamin A&D ointment to the bilateral buttocks, groin, coccyx, and scrotum QID and PRN for fecal incontinence episodes. Plan of care and wound care recommendations communicated to bedside RN. If wounds do not improve, deteriorate, become larger, or have an increase in drainage or odor, please reconsult WOC.

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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)

*Wash hands before and after patient care
*Wash the patient's bilateral buttocks and groin with soap & water and allow to dry thoroughly after each episode of fecal incontinence
*Apply Vitamin A&D ointment bilateral buttocks, groin, coccyx, and scrotum QID and PRN for incontinence episodes
*Check the patient for incontinence every 2 hours
*Limit the use of incontinence briefs to only when the patient is out of bed, in a chair, or going off the floor for a test or procedure.

Describe your thoughts related to the care provided. What would <u>you</u> have done differently

I incorporated prior discussion from other clinical experiences into the care I provided today. We did not have many patients to see today, so it gave me more time to really take the time and research my validations.

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?
I am halfway through my clinical requirements, so today we were trying to be more specific in my patient encounters to get the proper number of clinical hours for each specialty. We chose patients who may have a continent component
associated with the WOC referral or consult, and I was able to see two patients today who fit my goal. My goal was met.

What is/are your learning goal(s) for tomorrow? (Share learning goal with preceptor)
The plan is to continue to be more specific with the types of patients I see to fit my clinical requirements. I am sure to meet my ostomy and wound. I will try to get my continence hours done first, as it seems to be harder for me.

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For instructor use only. Do <u>not</u> 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:		
• 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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