



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

Daily Journal Entry with Chart Note & Plan of Care

Student Name: Carla Edeh Day/Date: Friday 10/17/25

Number of Clinical Hours Today: 8 Number of patients seen 5

Care Setting: Hospital Ambulatory Care Home Care Other

Preceptor: Sarah Weise

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, and any additional activities.

Patient 1: Evaluated for a leaking ostomy pouch following removal of the stoma Foley. The pouching system was assessed, and a new pouch was applied. Education provided regarding proper pouch application and troubleshooting leakage.

Patient 2: Provided pouch change and initiated Lesson 1 of ostomy self-care education in preparation for discharge. Patient demonstrated participation and verbalized understanding of basic pouching steps.

Patient 3: Evaluated prior to discharge with an end ileostomy. Assisted with completion of **supply order form** to ensure continuity of care at home.

Patient 4: Patient with loop ileostomy seen for midline staple removal per orders. Site cleansed, staples removed without difficulty, and incision assessed as clean, dry, and intact.

Patient 5: Evaluated JP drain site for reported leakage. Drain site and dressing assessed; no active leakage noted at time of visit. Provided patient reassurance and reinforced drain site care instructions.

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:**Assessment/encounter:****Date:** 10/17/25**Assessment / Encounter Note – WOC Nurse****Reason for Visit:**

Consult for leaking ostomy pouch and removal of stoma Foley.

Patient Information:39-year-old male, postoperative day (POD) #3 following creation of a new **loop ileostomy**. Patient is alert and oriented ×3, independent with self-care.**Pertinent History:****PMH:** Crohn's colitis, ulcerative colitis, anemia, iron deficiency anemia, portal vein thrombosis, primary sclerosing cholangitis, seborrheic keratosis, cherry angioma, keratosis, syncope.**Medications:** Iron supplement, acetaminophen (PRN).**Social History:** Denies tobacco, alcohol, or illicit drug use.**Labs:** Within normal limits.**Assessment of Abdomen and Stoma Site****Abdominal Exam:** Abdomen firm on palpation.**Stoma Type:** Loop ileostomy**Location:** Right lower quadrant (RLQ)**Diameter:** 1¾ inches**Protrusion:** Budded**Mucosa:** Red, pink, moist, and edematous; pink tissue visible at 9 o'clock.**Mucocutaneous Junction:** Intact**Peristomal Skin:** Light circumferential erythema adjacent to the stoma.**Peristomal Contour:** Rounded**Supportive Tissue:** Firm**Stool/Output:** Green effluent**Emptying Frequency:** Per nursing documentation.**Interventions / Procedures**

Existing pouching system removed using adhesive remover; flange lifted gently while applying downward pressure on abdomen.

Foley catheter noted inside the pouch; removed without incident.

Peristomal skin cleansed with mild soap and water, rinsed, and patted dry.

Assessment revealed need for **soft convexity** pouching system at this time due to firmness of abdomen; may transition to **deeper convexity** as abdomen softens postoperatively.

Applied new pouching system:

Hollister 2¼" tapeless flange (home supply)

CeraPlus ring used to fill separation noted at 3 and 9 o'clock (patient may use paste once healed)

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Opaque drainable pouch with Lock 'n Roll closure.
Previous system had less than 24-hour wear time with complete undermining noted.

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)

POC:

To achieve optimal pouch seal, protect peristomal skin integrity and increase pouch wear time to 3-4 days.

#1 Use Cova Tec Sensi-care no sting adhesive remover wipes to gently remove worn pouching system. This will help to minimize trauma to the epidermis and it will help to decrease discomfort.

2 Cleanse peristomal skin with warm water and a mild soap like dial, rinse and pat dry. Apply Conva tec stomadhesive powder to denuded/ irritated areas, removing the excess powder. Continue using the powder until the skin is healed.

#3 Apply Hollihesive wedge at the 3 o'clock position near the umbilicus to support convexity and improve seal. Use Coloplast soft convex drunable pouch as the pouching system and reinforce flange edges with Mefix tape to enhance wear time and prevent edges from lifting.

4 Educated staff on the proper technique of removing the old pouching system and signs of leakage eg. Skin irritations.

WOC nurse will f/u as needed.

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

Given the firmness of the abd and the unevenness of the peristomal area, a deeper convexity or a modable barrier ring could have been considered. But I thought the system chosen by the woc nurse was appropriate based on my limited experience.

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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?

Complete the assessment of the abd area and identify the appropriate pouching system and change independently.

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

Teach pouching change first lesson to the patient/ family.

For instructor use only. Do not remove or edit:

CRITICAL ELEMENTS	Completed	Missing
Medical record note reflects that of a specialist:		
<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 		
<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: _____ Date: _____

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