

Daily Journal Entry with Chart Note & Plan of CareStudent Name: Wei Xu Day/Date: Day 4, 01/08/2026Number of Clinical Hours Today: 8 Number of patients seen 5Care Setting: Hospital Ambulatory Care Home Care Other Preceptor: Lauren Forneris, CWOCNClinical 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.

Number of patients seen: 5

1. Stoma site marking – Hands-on site marking. Details see chart note
2. End ileostomy, mucosa fistula (created by colon at LLQ), partial dehisced abdominal surgical incision – Ileostomy mucocutaneous junction separation 9 to 3 o'clock, peristomal skin depression at 3 o'clock, HolliHesive used to wedge the depression area. Mucosa fistula with a 3.5 cm tunnel at 9 o'clock. Handson pouch changing. * Gauze place at stoma os after pouch remove to absorb active output. Partial dehisced abdominal surgical incision, surgical team follow up this, changed new ABD pads dressing to the wound.
3. Esophagostomy due to Aortoesophageal fistula – Patient in cardiovascular ICU. Stoma at left upper chest, close to incision and trach collar. A flat pouch cut off center to fit the stoma. Stama with whitish frothy output from saliva. This visit is a hands-on lesson to patient's mom.
4. End ileostomy – A new 12 y/r pediatric patient, established ostomy in 2018 due to congenital colonic malrotation. Hands-on pouch changed. Supplies offered.
5. End ileostomy and rectal stump mucus fistula @ infraumbilical 3 inches – Laparoscopic post-op day 1. Stoma edema. Hands-on pouch change. Education (how to empty pouch) offered and educational materials (output measurement form for 2 weeks, diet, supply order information, ileostomy information, etc.)

*** Preceptor offered a 1-hour pediatric ostomy care lesson to new hired pediatric nurses. During the class, I did pediatric ostomy pouch change stimulations.

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

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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.

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

Chart note:

This is a stoma marking consult for WOC nurse for this 72 y/o female patient, who was admitted due to abdominal pain. The surgery is scheduled tomorrow. The patient has history of significant Crohn's disease s/p ileocolic resection in 2002 for structure, cholecystectomy, pancreatic serous syst adenocarcinoma s/p partial pancreatectomy, intestinal bacterial overgrowth, GERD, T2DM, HTN, HLD, and metabolic dysfunction – associated steatohepatitis.

CT showed acute edematous pancreatitis and active inflammatory small bowel Crohn's with luminal narrowing.

The patient states having loose stools at baseline with MiraLax twice a day otherwise constipation. The patient was recently admitted to hospital due to abdominal pain in December 2025. Follow up with colorectal doctor and plan for open operation for redo ileocolic resection given symptomatic stricture at the prior staple side-to-side ileocolic anastomosis.

The surgical team consulted, discussed with the patient and decided to have the surgery done this time, and possible ileostomy creation.

WOC nurse came to the patient's room. Hospitalist was talking to her regarding the surgical plan. The patient is alert and oriented. Explain the purpose of stoma marking and how to mark it. With the patient's permission, stoma marking started with lying position. Rectus abdominis muscle boarders assessed by asking patient to lift head and coughing. Identifying a flat skin area in LLQ, within rectus abdominis muscle, avoiding scars, creases, beltline, and umbilicus, using a marking disc and marking a dot at the center hole of disc. Then the patient sits up with feet on floor, the dot is slightly above the summit of infraumbilical mound but still away from skin crease. Adjusted the dot to a short line slightly lower. In standing position, the new marked short line still meets the stoma site requirement. The patient is able to see the short line in lying, sitting, and standing positions. The short line was finalized and marked as a cross using a skin marker, covered with transparent Tegaderm dressing. Photos taken in lying, sitting, and standing position.

The patient states one of her daughters received an ostomy (not the bedside one) during an emergency surgery, and she is still unable to accept the stoma. With information shared with doctors, the patient understands her condition and is emotionally and mentally prepared for having a stoma. Other pre-op education offered including diet, fluid intake, ADL's, clothing adjustment, and exercise. The patient verbalized understanding. All questions are answered. Educational handouts offered.

During the visit, the daughter is at bedside with support and is involved in the patient's care.

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.

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WOC Plan of Care (include specific products)

Provide a cozy and relaxing environment for the patient
 Make sure patient able to get good sleep prior to surgery
 Offer pain management
 F/U post-operative for pouch change and lessons

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

I did the stoma site marking under preceptor's guidance. The preceptor agreed to my selection of the site. If the individual with a soft abdomen, they like to have creases in sitting position. Therefore, I would like to use the sitting position as initial marking position.

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 gained hands-on pouch change experience.
 Completed the stoma site marking under preceptor guidance.

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

To see patients with wounds.

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:		

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• 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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