

## Adult/Geriatric Critical Thinking Worksheet

**Student Name:** Megan Pirtle

**Unit:** E7

**Pt. Initials:** SC

**Date:** 10/10/2020

### 1. Disease Process & Brief Pathophysiology

Cervical Cancer - a type of cancer occurring in the squamous or glandular cells of the cervix. In this cancer, DNA in cervical cells become mutated and instead of dying after their "set" reproduction rate, they continue to grow rapidly and out of control ultimately leading to a tumor. It is decreasing in relevancy in the US due to the HPV vaccine. In some cases, the cancerous cells in both the glandular and squamous cells, but it very rarely is found in other places

### 4. Diagnostic Tests pertinent or confirming of diagnosis

Pap smear (P)

HPV DNA test (P)

Punch Biopsy

Endocervical Cutterage

Electrical Wire loop

Cone Biopsy/Conization (P)

### 2. Factors for the Development of the Disease/Acute Illness

Many sexual partners

Early sexual activity

STI's

Compromised Immune system (P)

Smoking (P)

Exposure to DES

### 5. Lab Values that may be affected

K (P)

WBC

Platelets

### 3. Signs and Symptoms

No Obvious signs in early stage

Vaginal bleeding (P)

watery, bloody, foul smelling discharge

pelvic pain (P)

pain during intercourse

### 6. Current Treatment

Raise Potassium levels

consult surgery

maintain physical activity

diet education

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**7. Focused Nursing Diagnosis:**

Pain

**8. Related to (r/t):**

Waiting to take pain medication

**9. As evidenced by (aeb):**

patient waits until pain level is above an "8" on the pain scale to request pain medication

**10. Desired patient outcome:**

Patient will use the call light to notify nurse when pain level starts to increase to prevent unnecessary suffering.

**11. Nursing Interventions related to the Nursing Diagnosis in #7:**

1 .Explain to pt that we are here to help them feel better

**Evidenced Based Practice:**

Using the call light to contact the nurse can ensure that the patient is directly and actively involved in their own care.

2. Address fear of drug dependency

**Evidenced Based Practice:**

Patient fears she will become addicted to pain medications despite the fact that people rarely become dependent on opioids when given in a controlled environment.

3. Address fear of opioids

**Evidenced Based Practice:**

Addressing pain earlier can prevent the patient from reaching a level of pain that calls for opioids

**12. Patient Teaching:**

1. Teach patient how to use the call light

2. Teach patient to report pain before it becomes intolerable

3. Teach patient to stay informed in their pain management plan

**13. Discharge Planning/Community Resources:**

1. Attend follow up appointments

2. Avoid inserting items (tampons, douches, etc.) in the vagina until cleared by physician

3. Engage in community resources like support groups

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