

Adult/Geriatric Critical Thinking Worksheet

Student Name: Marissa Hernandez

Unit: HC5

Pt. Initials: N/A

Date: 3/30/2021

1. Disease Process & Brief Pathophysiology

Seizure

A seizure is a uncontrolled, transient electrical discharge of neurons in the brain (cerebral cortex) that interrupts the normal function of the brain, responding to a stimulus.

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

(Determined by the site of the electrical disturbance)

family history, congenital defects, craniocerebral trauma (P), subarachnoid hemorrhage, stroke, intracranial tumors, infections, exposure to toxins, hypoxia, alcohol or drug withdrawal, metabolic and endocrine disorders including hypoglycemia, hypocalcemia (P), uremia, hypoparathyroidism, excessive hydration, and fever, physical stimulation including loud music, bright flashing lights, videos, lack of food or sleep, fatigue, menses or pregnancy.

3. Signs and Symptoms

Alteration in sensation, movement (P), perception (P), behavior, or consciousness (P), cyanosis, excessive salivation, tongue or cheek biting, incontinence may occur after the seizure, sudden stiff movement, loss of awareness and muscle tone(P).

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4. Diagnostic Tests pertinent or confirming of diagnosis

CBC, Urinalysis, electrolytes, creatine, fasting blood glucose, Lumbar puncture for CSF analysis, CT (P), MRI (P), MRA, MRS, PET scan, EEG, lumbar puncture and cerebrospinal fluid analysis.

5. Lab Values that may be affected

CBC: WBC (P), HGB (P), HCT (P), RBC (P), PLT, CMP: Electrolyte panel with blood glucose, sodium (P), potassium (P), calcium (P), creatinine (P)

6. Current Treatment

Drug therapy (antiseizure drugs) including Levetiracetam (Keppra), side rails with pads up as a safety precaution in the event of another seizure happening, full liquid diet, turn patient every two hours to prevent skin breakdown.

7. Focused Nursing Diagnosis:

Imbalanced nutrition

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

1 .Consult with dietician and HCP about patient's nutrition from the diet.

12. Patient Teaching:

1. Teach the patient as well as the family that the patient will not be able to go to a regular diet or even a soft food diet over night, it'll take some time as well as rehab to gain her strength back.

8. Related to (r/t):

Insufficient dietary intake

Evidenced Based Practice:

This intervention will help make sure the patient is receiving adequate amount of nutrition from her diet.

2. Teach the patient the importance of nutrition and hydration in order for the patient to be able to have any improvement in strength mentally and physically.

2. Weigh the patient weekly

3. Teach the patient as well as family exercises approved by the speech pathologist and HCP to strengthen the patients swallowing muscles.

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9. As evidenced by (aeb):

Nutritional status is a full liquid diet only, and patient isn't eating half of her liquid food.

10. Desired patient outcome:

Patient will be able to eat a soft food diet and get off of the full liquid diet by discharge.

Evidenced Based Practice:

This intervention will help determine if my patient is losing weight from inadequate nutrition, or if she is gaining/maintaining her weight from adequate nutrition.

3. Provide a pamphlet to the patient as well as family members at the bedside, teaching the importance of consuming an adequate amount of nutrition as well as a list of different types of foods in liquid form that can be given.

Evidenced Based Practice:

This intervention will help make sure the patient as well as her family members understand what's being taught in order to ensure the patient receives the nutrition she needs, and it will also provide a list of liquid diet sources in case the patient is unable to have any other type of diet.

13. Discharge Planning/Community Resources:

1. Provide the community resource Meals on Wheels since the patient is unable to work, effecting the ability to buy groceries.

2. Provide the community resource Epilepsy Foundation.

3. Provide the resource to the patient and family <https://acl.gov> , which is a nutrition resource to not only help support the patient's nutrition, but to also help financially as well, since nutrtrion can be expensive for some.