

<p>Universal Competencies (Address all)</p>	<p>Required Areas of Care (Address all)</p>
<p>*Health Care Team Collaboration: Fannie Mae will have an extensive health care team consisting of nurses, respiratory therapist, cardiologist, infectious disease doctor, primary healthcare provider, and nutritionist. All of these healthcare team members have a vital goal of restoring Fannie Mae to health. She needs a good diet to promote healing, nurses to watch over her while she's in the hospital, respiratory therapist to promote her lung expansion, infectious disease doctor because of her diagnosis of sepsis and the stage III pressure ulcer, and a cardiologist for her low blood pressure and high heart rate.</p> <p>*Human Caring: Therapeutic communication is vital to use when talking with Fannie Mae and her family. We must relate to her in a manner that shows we care for her well-being. When we are listening to her speak, we should be active listeners and get on her level. Fannie Mae will be included in her plan of care. We will respect her uniqueness including age, gender, ethnicity, religious beliefs, cultural differences, and personal preferences.</p> <p>*Standard Precautions: Hand hygiene is vital when caring for Fannie Mae because she already has illnesses and wounds, so she is more likely to get another infection. I will use hand sanitizer or wash my hands with soap and water before or when I enter the room, and wear gloves while touching Fannie Mae and while administering medication. My stethoscope, pulse oximeter, and other equipment used on her will be cleaned before and after my assessments. Asepsis will be maintained when it is needed for certain procedures and I will dispose of contaminated material according to protocol. Routine skin assessments will be made to ensure the already obtained pressure ulcer does not worsen.</p> <p>*Safety & Security: The patient will be identified with 2 identifiers and asked about allergies whenever I enter the room. The side rails will be raised, bed in lowest</p>	<p>*Assessment & Evaluation of Vital Signs: Getting her baseline vitals is important care for her properly. Fannies Mae's current vital signs are concerning because her blood pressure is low while her heart rate, temperature, and her respiratory rate are all high. The decreased blood pressure could be due to the diagnosis of dehydration and can be helped with fluids. The high heart rate and respirations could be related to her infection which can be treated with antibiotics. The high and increasing temperature is because of the infection and she will need an antipyretic to bring that down. She will be continually monitored closely.</p> <p>*Fluid Management Evaluation with Recommendations: I would recommend Fannie Mae's fluids being changed to normal saline or lactated ringers instead of D5½NS because she has a diagnosis of sepsis, is hypotensive, and has a lactate level of 4. I would also recommend that she gets a bolus of the isotonic fluid. She does need fluids to help with her low blood pressure and dehydration. The fluids will also aid in thinning her secretions produced by her pneumonia. I would also prophylactically teach Fannie Mae and her family about the signs and symptoms of fluid overload.</p> <p>*Type of Vascular Access with Recommendations: Fannie Mae has an 18-gauge intravenous to the right forearm. I would make sure that her IV site remains free of redness, irritation, and infection while also making sure that it is patent. Her IV site will be flushed once every shift. The dressing she has on her IV site will remain intact and dry and if it does not, I will change it to make sure we prevent an infection. I would place another IV for Fannie Mae in case she has to go to surgery and in case she may need blood products.</p> <p>*Type of Medications with</p>

<p>position, non-skid socks on, and no clutter will be on the floor when I leave the room. I will make sure that the patient always has her call light and knows how to use it. The 7 rights will be implemented when I am giving medications (right pt, med, dose, route, reason, documentation, and time). I will do an hourly rounding and address the 4Ps (pain, potty, position, and possession) with Fannie Mae. Privacy will be kept to the best ability whenever I am doing physical care and Fannie Mae will be provided with accurate information at all times. I will provide clear, accurate, and relevant teaching whenever it is needed during her care.</p>	<p><u>Recommendations:</u> Fannie Mae needs to be on antibiotics because of her increases WBC count, sepsis diagnosis, pneumonia diagnosis, and pressure ulcer wound. A bronchodilator may be beneficial to aid in her breathing because her respiratory rate is high, and her breaths are labored. Beta blockers may be needed to decrease the heart rate and respiratory rate too. Since she is in the hospital, she should get an anticoagulant to prevent blood clots prophylactically. Hopefully, the fluids and the bolus will increase her blood pressure, but if that does not then Fannie Mae will need to receive medication for that. Her temperature is high so she will need an antipyretic to drop that down.</p>
<p>Choose Two Priority Assessments and Provide a Rationale for Each Choice</p>	
<p><u>*Neurological Assessment:</u> <u>*Respiratory Assessment:</u> Because Fannie Mae is diagnosed with pneumonia and has an increased, labored respiratory rate, I would perform a respiratory assessment. I would do this assessment so that I could get a baseline on Fannie Mae and make sure that as time goes on and I continue to do assessments that her lung sounds get better and not worse. This would also be a way for me to make sure that she is breathing well in both lungs to ensure that oxygen is perfusing around her body. <u>*Abdominal Assessment:</u> <u>*Cardiac Assessment:</u> <u>*Skin Assessment:</u> Fannie Mae already has a stage III right hip pressure ulcer so I would want to make sure that my eyes see what that looks like so I can know if it is getting better or worse. I will make sure that the pressure ulcer heals while she is my patient, and she is taught how to take care of it when she leaves the hospital. The pressure ulcer dressing will be moist to promote healing. She will be frequently turned, have dressing changes when needed, and her other bony prominences will be padded to make sure another pressure ulcer does not occur.</p>	<p><u>*Oxygen Administration with Recommendations:</u> Oxygen is currently running on Fannie Mae at 4L via nasal canula. The goal is to keep the O2 sat above at least 90% and if that is not kept then the O2 will need to be increased or Fannie Mae may have to put on a O2 mask in order to get more oxygen. We have to make sure that Fannie Mae is getting enough oxygen to keep her organs perfusing. <u>*Special Needs this Patient Might Have on Discharge:</u> Because of Fannie Mae's advanced age, she may need home health assistance. The home health assistance will ensure she takes her medication, has oxygen, takes care of her pressure ulcer wound, does exercises to promote her lung expansion, and remains in a stable range for her vital signs. A case manager will also be consulted for her discharge to make sure she can afford her medication, home health assistance, and oxygen tanks. Teaching about fall risks, hand hygiene, and further wound infections will be taught before and at discharge.</p>

Nursing Management (Choose three areas to address)	
<p>*Wound Management: I would focus a lot of my attention on Fannie Mae's pressure ulcer because she is already compromised to infection because she is septic. Care of the wound is extremely important because she does not need any more infections. Keeping the wound moist, clean, and free from redness and infection will be addressed by keeping cleaning the wound and placing a clean, intact dressing on it will maintaining a sterility.</p> <p>*Drain and Specimen Management:</p> <p>*Comfort Management: Anxiety and pain will be counterproductive for Fannie Mae's respiratory status and overall healing process. I will make sure she knows that she is not alone and that I am there for her. I will make sure that her and her family are well informed about her current status and answer their questions to the best of my ability. Fannie Mae will be included in all her care decisions. Hopefully her feeling informed and like she has a voice will ease the stress of being sick and she can remain calm and focus on healing. I will also make sure to assess her pain and give her analgesics as ordered by the physician.</p>	<p>*Musculoskeletal Management:</p> <p>*Pain Management:</p> <p>*Respiratory Management: Fannie Mae is having a hard time breathing because of her pneumonia so easing that workload will help her healing process. I will have her sit up in bed, use the incentive spirometer, turn cough deep breath, and wear her oxygen to help decrease the strain of breathing. Frequent respiratory assessments are important for Fannie Mae and I would probably put a constant O2 sat monitor on her to be able to watch her on the monitor constantly.</p>