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**Date:** 08/04/21

## Adult Critical Thinking Worksheet #1

### 1.) Disease Process & Brief Pathophysiology:

A urinary tract infection (UTI) is a common bacterial infection in any part of the urinary system. Occurs in either an uncomplicated host setting or a complicated host setting. An uncomplicated host setting is where there is no underlying structural or functional abnormality of the patient's GU tract. A complicated host setting has common predisposing factors such as the presence of a urinary catheter (**P**). Development occurs when virulent uropathogenic microorganisms such as *Escherichia coli* are introduced into the urethra and ascends into the bladder. If left untreated, infection can spread to the kidneys or worse, cause urosepsis.

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

- Nonmodifiable Risk Factors:
  - female anatomy
  - menopause
  - urinary tract abnormalities
  - suppressed/weakened immune system (**P**)
  - blockages to urinary tract
  - Chronic Kidney Disease (**P**)
- Modifiable Risk Factors:
  - sexual activity
  - personal hygiene (**P**)
  - certain types of birth control
  - catheter use (**P**)

### 3.) Signs and Symptoms:

- a strong persistent urge to urinate
- a burning sensation when urinating
- passing frequent and small amounts of urine
- cloudy/turbid urine (**P**)
- urine that is red, bright pink or cola colored (sign of hematuria)
- green colored urine from rare *Pseudomonas* infection
- dysuria
- strong smelling urine (**P**)
- acute flank/back/groin pain
- confusion in older adults (**P**)

- pain or pressure in back/lower abdomen
- fatigue **(P)**
- fever
- chills
- nausea/vomiting **(P)**

**4.) Diagnostic Tests pertinent or confirming of diagnosis:**

- urinalysis **(P)**
- urine culture with antimicrobial susceptibility testing **(P)**

**5.) Lab Values that may be affected:**

- WBC >10 **(P)**
- Nitrites **(P)**
- Leukocyte esterase **(P)**
- pH

**6.) Current Treatment:**

- Drug Therapy:
  - antibiotics (fluoroquinolones) **(P)**
  - analgesics
  - foley care **(P)**
- Health Promotion/Education

**7.) Focused Nursing Diagnosis:**

- Impaired urinary elimination and acute confusion

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

- frequent urination, urgency, and hesitancy with altered mental status

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

- patient showing signs of confusion with the presence of foul-smelling/cloudy urine

### **10.) Desired patient outcome:**

- The patient will achieve normal urinary elimination pattern as evidenced by absent signs of urinary disorders by the end of their antibiotic course of treatment.
- The patient will regain normal orientation to person, place and time as evidenced by absent signs of fluctuation in level of consciousness within 3 days of treatment
- The patient will have negative cultures; clear and normal-smelling urine within 1 week after initiating treatment.
- The patient will initiate lifestyle/behavior changes to prevent or minimize recurrence by the time of discharge.

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

- The nurse will observe for cloudy or bloody urine, foul odor. Evidenced by signs of urinary tract or kidney infection that can potentiate sepsis.
- The nurse will evaluate mental status, orientation, and level of consciousness Q8h
- The nurse will give simple directions, allow sufficient time for patient to respond, communicate, and make decisions. Evidenced by reducing anxiety experienced in strange environment.
- Citations:
  - *For all your nursing needs.* Nurseslabs. (2021, August 5). <https://nurseslabs.com/>.
  - Swearingen, P. L., & Wright, J. D. (2019). *All-in-one nursing care planning Resource medical-surgical, Pediatric, maternity, and Psychiatric-Mental Health.* Elsevier.

### **12.) Patient Teaching:**

- Teach the importance of keeping genital area clean
- Educate regarding properly hydrating and the effectiveness of cranberry juice/supplements to promote urinary tract health
- Teach early signs and symptoms of UTI so that the patient can seek medical care before it progresses

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

- Contact case manager to assess the need for home health services
- Print handout with discharge information
- Give information about water/supplement tracking apps to help the patient reach their daily requirement.

