

<p><b>Universal Competencies (Address all)</b></p>	<p><b>Required Areas of Care (Address all)</b></p>
<p>*<u>Health Care Team Collaboration</u>: Members such as nurses, wound doctor, case manager, surgeon, lab personnel, pharmacologist and respiratory therapist will cooperatively work together to provide care for Mr. Mack and will problem-solve and make decisions based off pain levels, post op complications, care planning, and will provide education during his stay at the hospital and for time of discharge.</p> <p>*<u>Human Caring</u>: Professional behaviors and respect will be presented to patient in a caring manner. Mr. Mack's personal preferences will be respected, and his voiced concerns over unable to care for himself will be managed until he feels positive he is able to.</p> <p>*<u>Standard Precautions</u>: Principles of asepsis will be conducted during dressing changes or amputation site checks. Throughout nursing care, hand hygiene and wearing gloves will be done. Considering Mr. Mack is diabetic and is more susceptible to infections, extra precautions will be made.</p> <p>*<u>Safety &amp; Security</u>: Medication administration will be done safely and all patient information (i.e., allergies, name/DOB) will be confirmed before any medication is given to Mr. Mack. Bed rails, call light, non-skid socks, lowered bed and 4 P's will be addressed throughout visits.</p>	<p>*<u>Assessment &amp; Evaluation of Vital Signs</u>: Assessment and maintaining patient's airway, breathing, and circulation will be monitored often considering patient had a surgical procedure. Pain management will be needed, and watching for any signs or symptoms of infection from the amputation site will continue to be monitored. Blood pressure is slightly increased along with respirations, and temperature- will continue to monitor.</p> <p>*<u>Fluid Management Evaluation with Recommendations</u>: Fluids will continue to be monitored, and correct dosage and rate will be confirmed throughout patient care. Monitor for fluid overload and check IV sites to prevent any infection, infiltration and extravasation</p> <p>*<u>Type of Vascular Access with Recommendations</u>: Continuous monitor of AV fistula. Keep vascular access clean at all times and monitor for any signs of infection.</p> <p>*<u>Type of Medications with Recommendations</u>: Considering patient had a surgical procedure and would like to prevent infection, possibly a prophylactic medication to prevent any infection. Mr. Mack is also having complications with his diabetes so insulin is very important. Pain medication is a high priority for Mr. Mack as well. If Mr. Mack continues to have N/V, possible a medication for emesis.</p> <p>*<u>Oxygen Administration with Recommendations</u>: It's important for oxygen levels to remain between 95%-100% in order for perfusion to occur for wound healing. Current oxygen levels are 91%, Some recommendations to increase levels can be increasing fluid intake, change positions if not contraindicated, and deep breathing and coughing exercises.</p>
<p><b>Choose Two Priority Assessments and Provide a Rationale for Each Choice</b></p>	
<p>*<u>Respiratory Assessment</u>: Assessing respirations is important before procedure, after, and throughout hospital stay to watch for respiratory depression. As noted on the patient's chart, Mr. Mack has coarse crackles to the bilateral lower lobes of his lungs, so it is important that patient's lungs are listened to before and after procedure to report any changes. Monitor for function of respiratory muscles and make sure accessory muscles are not being used or signs of distress is occurring, and that lung volume is not reduced. Hypoxia can reduce wound healing time (amputation site) or even cause necrosis, so measures will be taken to make sure oxygen</p>	<p>*<u>Special Needs this Patient Might Have on Discharge</u>: Patient will need a case manager to help with accommodations at home. Patient may need a caregiver to help him at home while he recovers. Patient may also need crutches, or a wheel chair and home adjustments will be needed.</p>

Samantha Gonzalez

Module 8

CRE Assignment

<p>saturations are not low by continuing to monitor O2 saturation, or possibly also get an ABG ordered.</p> <p><u>*Cardiac Assessment:</u> Inspect chest for equal rises and make sure all four areas are heard for 2 complete cycles. Cardiac issues are a high risk after an amputation, and considering Mr. Mack has a history of congestive heart failure it is important that a cardiac assessment is done before, during, and after procedure to monitor for any abnormal changes. Mr. Mack will be placed on a ECG monitor if ordered by provider.</p>	
<b>Nursing Management (Choose three areas to address)</b>	
<p><u>*Wound Management:</u> Watch for moistness around amputation site considering a moist environment can predispose infection. Hand hygiene and gloves must be worn during wound care and any drainage or dried blood must be washed away with soap and water or whatever hospital protocol states to use. It's important to not scrub wound hard, and only pat gently around area. Teach patient to call provider if they notice any redness or red streaks on the skin going up the leg or if they notice any swelling after discharge.</p> <p><u>*Drain and Specimen Management:</u> Monitoring wound drainage is very important in relation to infection. As a nurse, noting any quality or quantity change such as an increase in drainage, color, or smell could prompt signs of infection. Document any changes into patient's chart and report these changes to their provider right away. Before discharge, teach patient on what to monitor for and if they notice any unusual changes, then they must call their provider right away to get an appointment scheduled.</p>	<p><u>*Pain Management:</u> Patient may begin to experience phantom limb pain or just pain in general. Non-pharmacological methods can be used such as position changes, propping the residual limb on pillow or cushion, cold pack, or possibly massage around area if able to. Some other methods that can be considered are imagery or maybe music. More of a pharmacological method is analgesics depending on what Mr. Mack rates his pain at. While prepping for discharge, Mr. Mack will be educated on ways to decrease his pain that he can manage at home, and he will be educated more on how physical therapy can help him further decrease pain and promote his recovery process.</p>