

Adult/Geriatric Critical Thinking Worksheet

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Unit: SIM

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<p><u>1.Disease Process & Brief Pathophysiology:</u></p> <p>Type 2 diabetes is a lifestyle disease and is the most common type of diabetes. It is an impairment in the way the body regulates and uses sugar (glucose) as fuel. This then results in too much sugar circulating in the blood stream and eventually overtime the pancreas cannot keep up with the high demand of insulin the body is needing to produce due to the sugar build up in the blood; beta cell failure appears and progresses. Overtime the pancreas gives up and stops producing the insulin the body needs.</p>	<p><u>2.Factors for the Development of the Disease/Acute Illness:</u></p> <ul style="list-style-type: none"> - Physical inactivity (P) <ul style="list-style-type: none"> - BMI \geq26 - HDL \leq 35 mg/dL or TG \geq 250mg/dL <ul style="list-style-type: none"> - HTN - First degree relative - High risk ethnic groups <ul style="list-style-type: none"> - Bad diet (P) 	<p><u>3.Signs and Symptoms:</u></p> <ul style="list-style-type: none"> - Polyuria, Nocturia - Polydipsia - Polyphagia - Recurrent infections - Prolonged wound healing (P) <ul style="list-style-type: none"> - Visual changes - Pain (P) - Cold and Clammy (P) - Numbness and tingling of hands and feet (P)
<p><u>4. Diagnostic Tests pertinent or confirming of diagnosis:</u></p> <ul style="list-style-type: none"> - Hemoglobin A1C - Blood sugar (P) 	<p><u>5.Lab Values that may be affected:</u></p> <ul style="list-style-type: none"> - Cholesterol - Triglycerides <ul style="list-style-type: none"> - HDL - LDL - Blood glucose (P) <ul style="list-style-type: none"> - BUN - Blood pressure (P) <ul style="list-style-type: none"> - WBC (P) 	<p><u>6.Current Treatment:</u></p> <ul style="list-style-type: none"> - Insulin (P) - Anti- diabetics (P)

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

<p><u>7. Focused Nursing Diagnosis:</u></p> <p>Impaired tissue integrity.</p>
<p><u>8.Related to (r/t):</u></p> <p>Extensive periods of pressure on one part of the body.</p>
<p><u>9.As evidenced by (aeb):</u></p> <p>Sacral wound.</p>
<p><u>10.Desired patient outcome:</u></p> <p>Patients wound will show healing and no further worsening before discharging home.</p>

1. Help pt. change positions frequently to keep from long periods of pressure on the sacrum. E/B This will allow the sacrum to heal by relieving pressure.

Evidenced Based Practice:

2. Change dressings frequently per protocol to prevent any worsening of the wound or any infection. E/B Being consistent with dressing changes allows the wound to breath while also not letting bacteria build up on the wound or dressing.

Evidenced Based Practice:

3. Utilize pillows, foam wedges and pressure reducing devices. E/B this will help reduce a pressure build up on the sacrum with the pt. is in supine position.

Evidenced Based Practice:

12.Patient Teaching:

1. Educate pt. on the importance taking their insulin within 15 minutes of a meal.
2. Teach pt. the signs and symptoms of hypoglycemia and what to do in that situation._
3. Instruct pt. to check their feet daily and avoid constrictive clothing._

13. Discharge Planning/Community Resources:

1. F/U
2. **Consult case worker to create a plan with a wound care specialist.**
3. Consult dietary to help pt. with better food choices.

Works Cited:

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