

Kennadce Mapp

Diagnostic Worksheet

Mark high / low values with (↑ or ↓)	Covenant Normal Values <small>*Diagnostic values vary from laboratory to laboratory.</small>	Dates		Mark high / low values with (↑ or ↓)	Covenant Normal Values <small>*Diagnostic values vary from laboratory to laboratory.</small>	Dates					
		Admit day	Most Recent			Admit day	Most Recent				
CBC	WBC	3.6-10.8 k/uL	13.75	11.06	↑	Sp Gravity	1.005 - 1.03	1.023			
	HGB	14-18 g/dL	16.9	11.5	↓	Protein	Neg / Trace	100			
	HCT	42% - 52%	46.3	31.4	↓	Glucose	Neg	0			
	RBC	4.7-6.1 m/uL	5.24	3.43	↓	Ketone	Neg - trace	15			
	PLT	150 - 400 k/uL	313	313		Nitrite	Neg	0			
CMP	Glucose	70-110 mg/dL	100	114	↑	Leukocytes	Neg	0			
	Sodium	134 - 145 mmol/L	136	134		Bilirubin	Neg	0			
	Potassium	3.5 - 5.3 mmol/L	5.0	3.6	↓	Blood	Neg	0			
	BUN	9-21 mg/dL	11	11.3		pH	7.35 - 7.45	7.3			
	Creatinine	0.8-1.5 mg/dL	1.1	0.8		Other Labs					
	Chloride	98 - 108 mmol/L	110	105	↑	Date					
	Calcium	8.4 - 11.0 mg/dL	9.3	8.0	↓	Culture					
	Mg++	1.6 - 2.3 mg/dL	7.7	5.7	↓	Blood					
	Total Protein	5.5 - 7.8 g/dL	3.6	2.2	↓	Urine					
	Albumin	3.4 - 5 g/dL	0.8	0.7	↓	Wound					
Lipid Panel	Total Bilirubin	0.1 - 1.3	3.7	16		Wound					
	AST(SGOT)	5 - 45 u/L	34	20							
	ALT (SGPT)	7-72 u/L	103	169	↑						
	Alk Phos (ALP)	38 - 126 u/L									
	Cholesterol	200mg/dL									
Common	TRIG	0-150 mb/dL									
	HDL	>60mg/dL									
	LDL	0-100 mg/dL									
	GFR	Refer to lab specific data									
	TSH	0.35 - 5.5 ULU/L									
	Digoxin	0.8 - 2 ng/dL									
	PT	10.0 - 12.9 secs									
	INR	Therapeutic 2 - 3									
	PTT	25.3 - 36.9 secs									
	BNP	5 - 100 pg/dL									
CKMB	0 - 5 ng/dL										
Troponin	neg = < 0.07 ng/mL										
		Point of Care Glucose Results									
Date	Time	Result	Date	Time	Result	Date	Time	Date	Time	Result	Result
1/18		Chest XR	1/19		CT Abd Pelvis w/Contrast	1/19		1/19		Small bowel resection tube tip in gastric body	No abnormality noted
1/19		Chest XR	1/19		Abd XR	1/20		1/20		Small bowel distention	Small bowel distention
1/20		FL barium enema								Unremarkable - Hartmanns	Rough

Primary only

Adult/Geriatric Medication Worksheet – Current Medications & PRN from 12pm prior day to 12pm current day

Student Name: Kennadee Mapp

Date: 01/31/23

Patient Allergies: NKA

Primary IV fluid and rate: D5NS 50ml/hr Continuous

Patient specific reasoning for IV fluids (including type isotonic, hypotonic, hypertonic):

Mineral + Electrolyte balance

Generic Name	Dosage with route and schedule	IVP-List diluent solution, volume, and rate of administration IVPB- List concentration and rate of administration	Patient specific therapeutic reasoning	Patient specific teaching with reasoning
Duloxetine Hydrochloride	30mg PO-daily		Antidepressant Anxiety	<ul style="list-style-type: none"> <li>Report worsening depression</li> <li>Report urinary retention</li> <li>Do not stop abruptly → withdrawal</li> </ul>
Gabapentin	300mg PO-TID		Nerve pain	<ul style="list-style-type: none"> <li>drop BP - do not take <sup>systemic</sup> <math>&lt; 100</math></li> <li>Report unusual mood</li> <li>Do not stop abruptly → seizure risk</li> </ul>
Acetaminophen Codeine	300-30mg PO-BID		Pain	<ul style="list-style-type: none"> <li>Report trouble breathing</li> <li>May cause dizziness, tired</li> <li>Spells → call light</li> <li>4000mg Tylenol is daily MAX</li> </ul>
Pantoprazole	40mg PO-daily		Stomach ulcer	<ul style="list-style-type: none"> <li>take E food</li> <li>Report diarrhea that does not improve</li> <li>Report rash</li> </ul>
Melatonin	PRN 5mg PO-Nightly		Insomnia	<ul style="list-style-type: none"> <li>Don't take during day light → less effective</li> </ul>

Can worsen depression  
Resp depressant

Primary only

Adult/Geriatric Medication Worksheet – Current Medications & PRN from 12pm prior day to 12pm current day

Student Name:

Date:

Patient Allergies:

Primary IV fluid and rate:

Patient specific reasoning for IV fluids (including type isotonic, hypotonic, hypertonic):

Generic Name	Dosage with route and schedule	IVP-List diluent solution, volume, and rate of administration IVPB- List concentration and rate of administration	Patient specific therapeutic reasoning	Patient specific teaching with reasoning
Potassium Chloride	PRN 0-40mEq PO		replace K+	• take $\bar{c}$ meals • take $\bar{c}$ full glass water • limit ↑ K foods
Tramadol	PRN 50mg PO q 6 hrs		Moderate to Severe Pain	• Black box: addiction • report trouble breathing • may cause dizziness
Enoxaparin			Blood clot Prevention	• inj into low back ↳ Avoid Hematoma • take if PLT $\geq$ 100,000

Resp depression  
→ Call light

Reference : micromedex

Student Name: KennadeeDate: 1/31/23

## Patient Physical Assessment Narrative

**PHYSICAL ASSESSMENT NARRATIVE BY SYSTEMS:** (Complete using assessment check list and reminders below).

**GENERAL INFORMATION** (Time of assessment, admit diagnosis, general appearance)

Assessment done at 0730. pt admitted c  
abd pain. pt appears happy and energetic.

**Neurological-sensory** (LOC, sensation, strength, coordination, speech, pupil assessment)

Alert + oriented x4 Sensation intact x6  
Strength is Strong bilaterally and movements are  
Coordinated. Speaks without problems.  
Pupils are round, equal, + reactive to light.

**Comfort level:** Pain rates at 5 (0-10 scale) Location: abd-incision pain

**Psychological/Social** (affect, interaction with family, friends, staff)

pt is friendly and acts appropriately with staff.  
family members present at bedside and pt acted  
appropriately.

**EENT** (symmetry, drainage of eyes, ears, nose, throat, mouth, including dentition, nodes, and swallowing) EENT Symmetrical with no drainage.

dentition is intact. mouth is moist without sores.  
nodes are not palpable.

pt is on a normal diet with no trouble swallowing

**Respiratory** (chest configuration, breath sounds, rate, rhythm, depth, pattern)

Chest Symmetrical without scars/bruising. Lung  
Sounds are clear in all lobes. RR 18.  
depth + rhythm: regular pattern: Equal

**Cardiovascular** (heart sounds, apical and radial rate, rhythm, radial and pedal pulse, pattern)

S<sub>1</sub> + S<sub>2</sub> auscultated  
apical + radial rate: 84  
radial + pedal pulse: 2+ bilaterally  
pattern + rhythm: regular.

Student Name: Kenndee

Date: \_\_\_\_\_

### Patient Physical Assessment Narrative

**Gastrointestinal** (bowel habits, appearance of abdomen, bowel sounds, tenderness to palpation) pt has BM daily. Abd is firm and nontender.  
Bowel sounds active x4. pt has an illiostomy

\_\_\_\_\_ Last BM 1/13

**Genitourinary-Reproductive** (frequency, urgency, continence, color, clarity, odor, vaginal bleeding, discharge) pt uses urinal frequently. no urgency.  
He is continent. urine is yellow + clear. urine is  
odorless, no deformities. discharge

\_\_\_\_\_ Urine output (last 24 hrs) N/A LMP (if applicable) N/A

**Musculoskeletal** (alignment, posture, mobility, gait, movement in extremities, deformities)  
pt is aligned, he sits up in bed. pt has stable  
gait and is FWB/WBAT. pt moves all extremities  
smoothly. no deformities.

**Skin** (skin color, temp, texture, turgor, integrity)  
Skin color appropriate for race  
skin is smooth and warm  
turgor < 3 seconds  
skin not intact. see below.

#### Wounds/Dressings

Lt Abd incision with wound vac.  
Lt Abd JP drain with foam dressing  
Rt Stoma  
Lt peripheral IV placed 1/28

#### Other

hx of diverticulitis, Anxiety,