

Universal Competencies (Address all)	Required Areas of Care (Address all)
<p><b>* Health Care Team Collaboration :</b></p> <ul style="list-style-type: none"> <li>In patient dialysis → normally schedule 3x's per week</li> <li>Case worker to set up home health someone to come help him with ADL's</li> <li>Wound care</li> </ul> <p><b>* Human Caring :</b></p> <ul style="list-style-type: none"> <li>ask if he has any Culture or Spiritual need that he would like to include in his plan of care</li> <li>patient just has a limb</li> <li>Spends time teaching to patient need show support</li> <li>not just task oriented, running in quickly out of patients room</li> </ul> <p><b>* Standard Precautions :</b></p> <ul style="list-style-type: none"> <li>asepsis for procedures and medication administration</li> <li>especially because the patient had a wound that didn't heal, we don't want to introduce new bacteria</li> <li>wear gloves whenever in contact with patient's bodily fluids</li> <li>clean hands when entering and exiting patients room</li> </ul> <p><b>* Safety &amp; Security :</b></p> <ul style="list-style-type: none"> <li>verify nursing interventions with physician orders</li> <li>2 patient identifiers</li> <li>fall bands fresh amputation</li> <li>hourly rounding 4 p's pain, position, possessions, presence loss of mobility with amputation</li> </ul>	<p><b>* Assessment &amp; Evaluation of Vital Signs :</b></p> <p>Pain assessment → after he ordered pain medication then reassess          I'm concerned about his BP 150/90          I need to ask the patient does he know what it normally runs          the pain could be causing an increase in BP          his temp. I would continue to warm and his wife is on the higher end of the normal range</p> <p><b>* Respiratory Assessment</b></p> <p><b>* Fluid Management Evaluation with Recommendations :</b></p> <p>Continue NS, Slow down the rate.</p> <p><b>* Type of Vascular Access with Recommendations :</b></p> <p>2 large bore IV's increase the de order an insulin drip</p> <p><b>* Type of Medications with Recommendations :</b></p> <p>long acting insulin Patient is taking regular insulin and still blood sugar is remaining high</p> <p><b>* Oxygen Administration with Recommendations :</b></p> <p>Nasal Canula may not have adequate perfusion due to the crackles in lower lungs.</p> <p><b>* Special Needs this Patient Might Have on Discharge :</b> home health. So someone can help make sure he is taking care of his new surgical wound so that he don't get a new infection. Also to help patient to adhere to medication orders</p> <p>transportation for dialysis treatment because pts own and ER is high inpatientive of kidney failure.</p>
<p><b>Choose Two Priority Assessments and Provide a Rationale for Each Choice</b></p>	
<p><b>* Neurological Assessment :</b></p> <p><b>* Respiratory Assessment :</b> possible fluid over load patient on dialysis, and</p> <p><b>* Abdominal Assessment :</b></p> <p><b>* Cardiac Assessment :</b> want to make sure the patient don't bleed out</p> <p><b>* Skin Assessment :</b> Ht and BP changed could indicate hemorrhage</p> <p>I want to see how his fresh amputation is healing or if an infection is setting in or not.</p>	
<p><b>Nursing Management (Choose three areas to address)</b></p>	
<p><b>* Wound Management :</b> to make sure it's heal and clean dry intact dressy</p> <p><b>* Drain and Specimen Management :</b></p> <p><b>* Comfort Management :</b></p> <p>patient may need counseling to due loss of leg and ask about spiritual beliefs to help comfort him while adjusting to his new amputation</p>	<p><b>* Musculoskeletal Management :</b></p> <p><b>* Pain Management :</b> because the patient was in severe pain with high doses of medication</p> <p><b>* Respiratory Management :</b></p>