

Marcie Neudorf

ADPIE Nursing Care Plans in Six Easy Steps SV

Assessment	Diagnosis	Planning	Interventions	Evaluations
<p><i>Must assess your patient.</i></p> <p><u>Subjective:</u></p> <p>Reports of nausea</p> <p><u>Objective:</u></p> <p>Vomiting Chemo tx 24hrs ago Stage 4 cervical ca Pt lying on side with arms around stomach Skin is cold and clammy VS Hx of appendectomy and c-section</p>	<p><i>Based on assessment findings</i></p> <p>Risk for electrolyte imbalance</p> <p>related to: chemotherapy treatment</p> <p>as evidenced by: vomiting.</p>	<p><i>Plan patient goals & desired outcomes. This is specific to the patient and must be measurable.</i></p> <p>Pt will maintain/ attain electrolyte levels WNL.</p> <p>Pt will stop vomiting.</p> <p>Pt will tolerate clear liquid diet.</p> <p>Pt will tolerate diet as it is advanced.</p>	<p><i>The nurse performs to help pt. move towards goals. Must be measurable.</i></p> <p>Draw CMP as ordered.</p> <p>Administer IVF as ordered.</p> <p>Administer PRN antiemetics to decrease/ end vomiting.</p> <p>Advance diet as tolerated beginning with clear liquid diet.</p> <p>New intervention after evaluation: Replace electrolytes PRN as ordered.</p>	<p><i>Evaluate if planning/goals were met or unmet.</i></p> <p>Met ✓Unmet</p> <p>✓Met Unmet</p> <p>✓Met Unmet</p> <p>✓Met Unmet</p>

Steps **1:** read the scenario **2:** look at the assessment data (subjective & objective) **3:** develop the ND (based on an assessment) **4:** develop the patient goals (planning); what are you going to do for this patient to help get them better, to overcome the ND **5:** nursing interventions NI is what needs to be done to help the patient meet their goals (very patient oriented & nurse specific) **6:** evaluate how the patient is meeting their goals or you may have to redo your ND due to a change or you will redo/change your NI

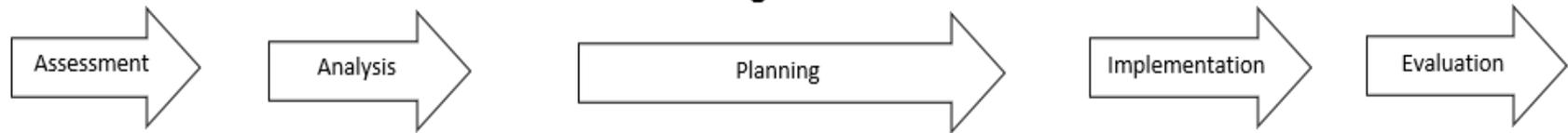
Scenario: A 25-year-old female is admitted with extreme nausea and vomiting. The patient had chemotherapy treatment 24 hours ago. She is receiving chemo for stage 4 cervical cancer. The patient is lying on her side with her arms around her stomach. The patient says she is extremely nauseous. On assessment, her skin is cold & clammy, VS: HR 101, BP 120/80, Temp 99.2 F, O2 sat 98% on room air.
History: Appendectomy, c-section



National Council of State Boards of Nursing (NCSBN) Clinical Judgement Model - (layer 3)



Nursing Process



Covenant School of Nursing End of Program Student Learning Outcomes (CSON SLOs)

	Assessment & Intervention	Communication	Critical Thinking	Human Caring & Relationship	Management	Leadership	Teaching	Knowledge Integration
Nursing 1208 & Nursing 1301 & 1300 End of Instructional Module & End of Program Student Learning Outcomes	Provide competent nursing interventions based on the assessment of patient and family needs, evidence-based practice, and application of the nursing process to meet the needs of the whole person.	Communicate effectively with individuals across the lifespan, families, and members of the healthcare team.	Function as a nurse generalist who is competent in making clinical decisions and independent judgments based on reliable patient-related data and evidence-based practice.	Integrate concepts of caring and professional standards into nursing practice.	Coordinate resources to promote optimal levels of health for patients, families, and the community.	Collaborate effectively with interprofessional caregivers to promote optimal levels of health for patients, families, and the community.	Teach concepts of health promotion, maintenance, and restoration to patients, families, members of the healthcare team and the community.	Integrate concepts from biological, sociological, and psychological sciences to provide competent evidence-based nursing care for patients across the lifespan and health-illness continuum.

Universal Competencies

Safety & Security	Critical Thinking	Professional Role Performance
Standard Precautions	Documentation	