

East 7 Clinical Information Sheet

Crow's Cell- 806-786-8000

East 7 - 806-725-6297

REQUIRED MEDICATIONS FOR FIRST CLINICAL DAY

1. Vancomycin
2. Metoprolol
3. Prednisone
4. Ondansetron
5. Levofloxacin

Room Codes- Clean linen 54321, Central Supply, Blood pressure machines- 56364

Dirty linen 51016

Your clinicals begin at 0630 on Tuesday/Wednesday/ If you are going to be absent or are going to be late, you must text/call me.

Never leave the floor unless you check with me first, this includes going to radiology, IR or Dialysis.

Suggested Daily Schedule

0630 Meet at Starbucks in the Lobby. Brief tour of E7.

0645 Turn in assignments. Get nurse assignment. (E7 is a small unit. Some will share a nurse.) **INTRODUCE yourself to your nurse.** Go with your assigned nurse and get bedside report on each of his/her patients. You will then pick your patient. **Let me know the room you are taking ASAP. Let your TPCN nurse know that you will be doing AM care, charting VS, Rounding, I/O's, and passing meds on your patients either with your instructor or them and any procedures that come up you can do with them or your instructor.**

0715 Get vital signs-record them in the chart. Let your nurse know any abnormal results. Vitals will be obtained every 4hrs -0700,1100,1400. **Your physical assessment and bath need to be done early in the day-as this tells you how the patient is doing.**

08-10 Med administration- I will give with half on Tuesday and another half on Wed. You need to look up what medications you will give and at what time it is due. The student and I will pull the medications from Pyxis. You may give meds with your nurse if not giving with me.

You do not have to memorize each medication BUT know what you are giving i.e. Blood pressure, antibiotic, antiemetic, ect..this will require you to get in your patient's chart. Use smart time management. * * *

10-1200 Use this time to catch up- at this point the following should be done or in the process of; **VS, Assessment, Bath, Linen change on bed, Med administration and acudata- help your peers**

12:00 Debrief

EMR- look through your patient's chart, read over H&P, progress notes, review labs and radiology reports- WHAT do you notice? What is the number one problem that brought your patient to the hospital and how do you know? Do you notice any patterns or deviations from expected labs? Is your patient getting better or worse than when admitted? How do you know? What body systems need to have thorough nursing assessment(focused assessment) because of the primary problem? What is the current nursing priority? What complications might you expect based on the primary problem? Are you able to summarize pathophysiology of this problem in your own words to your patient? Don't be afraid to ask your nurse or instructor for help.

AM Care and ambulation-this is not an option for most patients. You can not force but you can highly encourage and educate the importance. **Do NOT leave patient room while patient is in the shower.**

Before we leave-Complete tasks/procedures **clean patient's room and leave orderly. Be sure your patient has fresh water, Kleenex, etc.**