

## Adult/Geriatric Critical Thinking Worksheet

**Student Name:** Jasmine Rodriguez

**Unit:** E7

**Pt. Initials:** MG

**Date:** 12/15/2021

### 1. Disease Process & Brief Pathophysiology

Pancreatitis is a disease in which the pancreas (the large gland behind the stomach and next to the small intestine) becomes inflamed. It is the painful inflammatory condition in which the enzymes of the pancreas are prematurely activated resulting in autodigestion of the pancreas. The common cause of pancreatitis are biliary tract disease and alcoholism, but can also result from such things as abnormal organ structure, blunt trauma, penetrating peptic ulcers, and drugs such as sulfonamides and glucocorticoids.

### 4. Diagnostic Tests pertinent or confirming of diagnosis

- abdominal ultrasound
- CT scan (P)
- MRI (P)
- endoscopic ultrasound
- stool tests
- blood tests (P)

### 2. Factors for the Development of the Disease/Acute Illness

- biliary tract disease
- alcoholism
- abnormal organ structure
- blunt trauma
- penetrating peptic ulcers
- medications: (sulfonamides and glucocorticoids)
- diabetes (P)
- abdominal surgery (P)
- gallstones (P)-

### 5. Lab Values that may be affected

- amylase (P)
- lipase (P)
- blood glucose (P)
- WBC (P)
- CMP (P)
- UA (P)

### 3. Signs and Symptoms

- gallstones
- upper abdominal pain (P)
- abdominal pain that radiates to your back
- tenderness when touching abdomen (P)
- fever
- rapid pulse
- nausea (P)
- vomiting (P)
- pain that worsens when eating (P)

### 6. Current Treatment

- early eating (P)
- pain medications (P)
- intravenous (IV) fluids (P)

**7. Focused Nursing Diagnosis:**

Acute pain

**8. Related to (r/t):**

pancreatitis

**9. As evidenced by (aeb):**

- observed evidence of pain
- guarding behavior
- expressive behavior ( restlessness)
- positioning to avoid pain

**10. Desired patient outcome:**

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

1 .I will investigate verbal reports of pain, noting specific location and intensity (0-10) scale. Note factors that aggravate and relieve the pain

**Evidenced Based Practice:**

E/B: self- report is considered the single most reliable indicator of pain presence and intensity, and single dimension pain ratings are valid and reliable as measures of pain and intensity level

2. pt will maintain bed rest during acute attack. provide quiet, restful environment

**Evidenced Based Practice:**

E/B: decreases metabolic rate and GI stimulation and secretions, therefore reducing pancreatic activity

3. I will provide alternative comfort measures, encourage relaxation techniques (guided imagery, visualization), quiet diversional activities (Tv, radio)

**12. Patient Teaching:**

1. teach pt to limit physical activities/ do them in small increments w/ breaks.

2. teach pt to report pain as soon as it begins and to not wait until it is unbearable

3. teach pt about nonpharmacological methods like deep breathing or changing positions.

**13. Discharge Planning/Community Resources:**

1. case manager to assess the pt. need for home health services.

2. review medications w/ pt. make sure they have a full understanding on when and how to take their meds.

3. assess pt and families awareness and knowledge of the diagnosis

\*\*\*\*\* citations:

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-by December 15, 2021 by 1500 patient will be able to verbalize a decrease in pain by rating the pain less than 4 on a (1-10) pain scale.

**Evidenced Based Practice:**

E/B: promotes relaxation and enables to refocus attention; may enhance coping

- Mayo Foundation for Medical Education and Research. (2021, September 24). Pancreatitis. Mayo Clinic. Retrieved December 16, 2021, from <https://www.mayoclinic.org/diseases-conditions/pancreatitis/diagnosis-treatment/drc-20360233>

Shaban, & Asha. (2020, December 5). 8+ pancreatitis nursing care plans. Nurseslabs. Retrieved December 16, 2021, from <https://nurseslabs.com/5-pancreatitis-nursing-care-plans/6/>