

Firelands Regional Medical Center School of Nursing Care Map

Student Name: Tamica Ivey

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Noticing/Recognizing Cues:

Highlight all data from each box relevant to top nursing priority

Assessment findings:

Subjective
 Patient reports pain 9/10 describes pain as wrenching in the RUQ of the abdomen
 States pain is not relieved by medication
 Patient states that she feels urgency with urination
 Patient reports not having a bowel movement in 48 hours
 Patient verbalizes feeling stressed related to anticipation of CT scan results.

Objective:
 Abdominal Incision with staples
 Wound bed to incision site: pink
 Skin: increased warmth to touch
 Abdomen: Tender, Distended
 Heart rate: 93
 Blood Pressure: 167/84
 Temperature: 99.5
 Urine: Amber colored
 NPO

Lab findings/diagnostic tests:

WBC: 20.0 (elevated)
 PH: 7.07 (elevated)
 RBC: 3.10 (low)
 Hgb: 9.7 (low)
 Hct: 29.1 (low)
 BUN 4 (low)
 Calcium 7.9 (low)
 AST: 43 (elevated)
 Albumin: 1.9 (low)
 CT scan: Several Abscesses in abdominal cavity, right basilar atelectasis (partial collapse of the lung)
 Right pleural effusion (fluid in pleural space)
 Urine results: (Evidence of a UTI)
 - Protein: 100(elevated)
 - Ketones: 4+ (elevated)
 - Occult blood 3+ (elevated)
 - Leukocyte E. 1+ (elevated)
 - RBC 50 -100, WBC 5-9 (elevated)

Risk factors:

Post op: bowel resection with anastomosis
 History of:

- MALT (non-Hodgkins) lymphoma
- Coronary Artery Disease
- Depression
- Hypothyroid
- Hypertension
- Myocardial Infarction
- Hysterectomy
- Heart artery stent
- Lumbar fusion
- Chronic back pain

Family history colon cancer (mother)(father)

Interpreting/Analyzing Cues/Prioritizing Hypotheses/Generating Solutions:

Nursing priorities:

Acute Pain
 Impaired Gas Exchange
 Impaired Skin Integrity
 Impaired Physical Mobility
 Impaired Wound Healing
 Risk for surgical site infection
 Impaired Tissue Integrity
 Dysfunctional Gastrointestinal Motility

Responding/Taking Actions:

Nursing interventions:

1. Perform a comprehensive assessment of pain. Determine the location, characteristics, onset, duration, frequency, quality, and severity of pain via assessment.
 - a. By assessing the patients self-report of pain will help determine planning for interventions to relieve the pain
2. Assess vital signs: blood pressure, pulse rate, temperature, pulse oximetry, and respirations
 - a. Elevated values might be precipitated by the evidence of pain.
3. Administer Dilaudid 0.5mg q6h IV push as needed for pain
 - a. Pain relief
4. Promote periods of rest for patient during movement
 - a. Fatigue can contribute to pain
5. Provide a relaxing environment
 - a. A quiet, darkened room with minimal noise and interruptions can promote rest and reduce pain.
6. Educate patient on non-pharmacological pain management methods (relaxation/breathing exercises or music therapy)
 - a. The goal is to reduce pain related to tension or stress.

Potential complications:

Opioid pain medication dependence

- Depression
- Physical agitation
- Poor decision making
- Mood Swings
- Lowered motivation

Insomnia

- Difficulty falling asleep at night
- Waking up during the night
- Difficulty paying attention, focusing on tasks
- Ongoing worries about sleep

Worsening of existing disease

- Patient develops sepsis: (low blood pressure, fatigues, chills, dizziness)
- Presence of another bowel obstruction
- Infected surgical wound (redness at the site, inflammation, foul-smelling drainage, poor wound healing)

Exacerbation of hypertension

- Lightheadedness
- Blurred vision
- Shortness of breath
- Blood Pressure remains above 140/90

Increased intracranial pressure

- Headache
- Confusion
- Vomiting
- Blood pressure above 140/90
- Changes in behavior

Sepsis

- Tachycardia
- Hypotension
- Confusion
- Oliguria
- Lactic Acid level > 2

Respiratory distress

- Blue skin pallor
- High carbon dioxide level in the blood < 21
- Muscle weakness
- Shortness of breath
- Coughing
- Spo2 < 90%

Reflecting/Evaluate Outcomes:

Evaluation

- ❖ VS: BP- 164/89, P-90, Spo2-95% on RA, Temp.-99.8, RR- 18 Patient reports abdominal pain 8/10 in RUQ that's wrenching related to abscesses in abdomen.
- ❖ **Modify Plan of Care**