

**Firelands Regional Medical Center School of Nursing
Nursing Care Map**

Student: Name: Leah McNeely

Date: November 17th, 2023

Noticing/Recognizing Cues:

Highlight all related/relevant data from the Noticing boxes that support the top priority problem

Assessment findings*:

- HR: 144 -Bilateral lower lobe crackles
- RR: 28 -Bilateral upper lobe wheeze
- BP: 153/79 -SOB on exertion
- SpO2 on RA: 82% -Unable to lay flat
- SpO2 on 4L/min: 88% -Tachypnea
- Cough -Labored breathing
- Thick yellow sputum -Deep breathing

Lab findings/diagnostic tests*:

- WBC: 21.4 -Albumin: 3.3
- RBC: 3.41 -PT: 15.1
- Hgb: 10 -Neut: 16.6
- Hct: 30.3 -Mono: 1.2
- Platelets: 461 -Co2: 31.3
- Cl: 109 -ECG: sinus tachycardia
- Chest X-ray: Right base infiltrate

Risk factors*:

- History of asthma
- History of COPD
- Past smoker (quit 3 1/2 weeks ago)
- 71 years old
- History of Hypertension
- History of congenital kidney disease
- History of Atrial Fibrelation

**Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:**

Nursing priorities*: ***Highlight the top nursing priority problem***

- Impaired gas exchange -Risk for thrombosis
- Ineffective breathing pattern -Risk for infection
- Ineffective airway clearance
- Decreased activity tolerance
- Fatigue

Potential complications for the top priority:

- | | |
|--|--|
| <ul style="list-style-type: none"> Hypoxia Tachycardia Tachypnea Dyspnea Decreased SpO2 | <ul style="list-style-type: none"> Spesis Tachycardia Hypotension Hyper/hypothermia Confusion Lethergy |
| <ul style="list-style-type: none"> Cyanosis Blue lips Blue fingernails | <ul style="list-style-type: none"> Respiratory Failure Chest wall retraction Increase work to breath Decreased SpO2 Decreased conciousness Bradypnea |
| <ul style="list-style-type: none"> Adolectasis SOB Tachypnea Cough Wheezing | |

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Responding/Taking Actions:

Nursing interventions for the top priority:

- Assess level of consciousness every 4 hours or PRN
Rationale: To identify possible respiratory failure
- Assess and monitor respirations every 4 hours or PRN
Rationale: To identify difficulty breathing
- Auscultate lungs every 4 hours
Rationale: To identify if lungs are working properly
- Monitor vital signs (SpO2) every 4 hours
Rationale: To identify the patient's overall status
- Administer IV antibiotics daily as ordered
Rationale: To treat the patient's pneumonia
- Administer Guaifenesin 1200mg every 12 hours
Rationale: To treat patient's pneumonia
- Encourage deep breathing and coughing every 2 hours or PRN
Rationale: To clear lung secretions and open airways
- Encourage fluid intake throughout the day
Rationale: To improve secretion clearance

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Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

BP: 150/87	Wheezing in bilateral upper lobes	Yellow thick sputum	
RR: 28	Fine crackles in bilateral lower lobes		Continue plan of care
SpO2 on 1 L/min: 94%	Breathing unlabored and normal		
HR: 91	Intermittent cough		
SOB on exertion	Unable to lay flat		