

Firelands Regional Medical Center School of Nursing  
Nursing Care Map

Student Name \_\_\_\_\_

Date \_\_\_\_\_

Noticing/Recognizing Cues:

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

**Assessment findings\*:**

Diminished lung sounds  
SpO2 drop with activity  
Nonproductive cough  
SpO2 on Oxymerizer 6L  
Weakness  
SOB on exertion  
SOB while lying supine  
Redness on coccyx  
SpO2 96% room air  
Blood Pressure 94/59

**Lab findings/diagnostic tests\*:**

CO2: 36.3 most recent (high)  
Cl most recent was 96 (low)  
Chest x-ray results stated SOB increasing  
WBC on admission 12.2 (high)  
K on admission 3.2 (low)  
Glucose on admission 129 (high)

**Risk factors\*:**

Age 79 years old  
Pulmonary fibrosis  
Hx of mumps  
Hx of measles  
Hx of hypertension  
Hx of colon cancer  
Medicare

Prioritizing Hypotheses/  
Generating Solutions:

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

Ineffective breathing pattern  
Impaired gas exchange  
Fall prevention  
Wound healing  
Absence of new skin breakdown  
Maintain/increase activity levels

**Potential complications for the top priority:**

Hypoxia  
Restlessness  
Headache  
Confusion  
Tachycardia  
Tachypnea  
Wheezing  
Pulmonary hypertension  
Dyspnea  
Weakness  
Jugular venous distention  
Peripheral edema  
Lung infections  
Cough

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Responding/Taking Actions:

Nursing interventions for the top priority:

- Assess vital signs: Assess q4h to determine any abnormalities
- Assess respiratory status: Assess q4h or prn to see any changes in respiratory status
- Assess level of consciousness: q4h or PRN to determine if oxygen is too low.
- Auscultate lung sounds: q4h or PRN to determine if there is any fluid or air in the lungs.
- Position pt in a semi fowler's position: PRN to help the patient maintain an open airway and improve breathing.
- Administer Lipitor: Administer PO q24h as a lipid lowering agents
- Administer Hyzaar: Administer PO q24h for management of hypertension
- Administer Guaifenesin: Administer PO BID for cough associated with viral upper tract infection
- Administer Azithromycin: Administer PO q24h to help with upper respiratory infection
- Administer Xarelto: Administer PO q24h to prevent DVT or PE
- Administer Albuterol/ Ipratropium: Administer QID through nebulizer to prevent bronchospasm
- Position pt in a semi fowler's position: To help the patient maintain an open airway and improve breathing.
- Oxygen therapy: PRN to keep SpO2 level >95.
- Chest Physiotherapy: PRN to help pt clear excretions that are in the lung and improve quality of breathing.
- Skin care: PRN to prevent the breakdown of the skin on the coccyx and prevent formation of pressure wounds.
- Sputum culture: To identify if there are any infections present in the lungs.
- Early ambulation: Q2h to prevent complications of DVT or PE; also to help with improving lung function.
- Educate on deep breathing and coughing: PRN and on discharge to educate pt on the benefits.

Pt denies any pain  
RR: 20  
SpO2: 98% (nasal cannula)  
Temperature: 97.4  
CO2: 36.2 (high)  
BP 106/57  
WBC most recent 11.2  
K levels most recent 3.6  
Glucose most recent 79  
Cl most recent 96 (low)  
Diminished lung sounds  
SOB on Exertion  
SOB while lying down  
Nonproductive cough  
SpO2 drops with activity