

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

Student Name  Cameron Beltran

Date  02-16-24

**Noticing/Recognizing Cues:**

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

**Assessment findings\*:**

- Overall pain 10/10
- Pain in left ankle 9/10
- Pain in back 7/10
- Headache
- Bilateral knee pain 6/10
- Right facial droop
- Low Temp - 97.4°F and 97.5°F
- High BP - 146/79 and 135/83
- Bruises on legs
- Poor vision
- Forgetfulness
- General weakness
- Upper and lower dentures
- Stress/functional incontinence
- Uses walker, wheelchair, and canes
- Sad mood because of family issues

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

- ECG - abnormal
- Schmorl's node formation
- Bilateral renal cortices cysts
- Bulging disc between L4 and L5
- Spinal stenosis L4 and L5
- Left ankle x-ray
  - o Diffuse soft tissue swelling
  - o Plantar calcaneal spurring
  - o Achilles surface calcaneal spurring

**Risk factors\*:**

- H/o Stroke
- Diabetes
- BMI - 31
- Age 70
- Rheumatoid arthritis
- Left sprained ankle
- HTN
- COPD
- HF
- Generalized weakness
- Hyperlipidemia
- Frequent falls
- Asthma
- Seizure disorder
- H/o syncope
- H/o Chest pain
- H/o Uterine cancer
- H/o BPPV
- H/o PAF
- H/o CVA
- Two story house

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

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

- Acute Pain
  - o DVT
  - o Depression
  - o Chronic Pain
- Impaired mobility
- Impaired urinary elimination
- Risk for falls

**Potential complications for the top priority:**

- DVT
  - o Leg pain
  - o Leg swelling
  - o Skin warm to touch
- Depression
  - o Loss of interest in activities previously interested in
  - o Decreased appetite
  - o Thoughts of suicide/ change in behavior
- Chronic pain
  - o Recurrent pain longer than 3 months
  - o Altered sleep-wake cycle
  - o Anxiety or fear

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Responding/Taking Actions:

Nursing interventions for the top priority:

1. Assess Pain q4H  
Rationale: to ensure comfortability and pain management
2. Assess vitals q2H  
Rationale: to ensure that she is WNL
3. Assess integumentary system q4H  
Rationale: for the bruises on her legs from her falls
4. Assess vision q day with and without glasses  
Rationale: to assess her ability to see her environment to prevent falls
5. Assess neuro q4H  
Rationale: to assess her memory and compare her forgetfulness to baseline
6. Assess neuro for general weakness q4H  
Rationale: to assess her ability to walk as well as compared to baseline
7. Administer Tylenol 650 mg q8H PRN  
Rationale: to relieve acute and arthritic pain
8. Administer escitalopram 10mg daily  
Rationale: to inhibit the reuptake of serotonin, better her mood, and decrease depression
9. Teach patient about guided imagery daily before discharge  
Rationale: to educate a method of pain alleviation in the form of distraction when she cannot not have medication



Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- Overall pain from 10/10 to 6/10 on a scale of 0-10
- Low Temp - 97.4°F to 97.5°F
- High BP - 146/79 to 135/83
- HR- 60, RR - 16, SpO2 - 100%
- Mood upset, but less sad than previous observation

Continue plan of care