

Firelands Regional Medical Center School of Nursing
Nursing Care Map

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Noticing/Recognizing Cues:

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

Assessment findings*:

- Heart murmur
- Irregular pulse rhythm
- 8/10 chest pain on admission
- Dentures
- BP 164/79
- HR 74
- Chest pain with activity

Lab findings/diagnostic tests*:

- 2 stents LAD - Cardiac Catheterization Report
- Triglyceride 212H
- Sodium 134L
- BUN 24
- Creatinine 1.20
- Glucose 115H
- Troponin 13.3

Risk factors*:

- 78 years old
- Smokes cigars daily
- Drinks 5 beers daily
- H/O Coronary Artery Disease
- H/O Transient Ischemic Attack
- H/O Peripheral Vascular Disease
- High fall risk - 13
- H/O sleep apnea
- H/O intravascular stent replacement (x8)
- H/O bilateral carotid endarterectomy (x2)
- Heart artery stent
- Prostate surgery (x4)

Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

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

- Acute pain
- Risk for falls
- Impaired tissue perfusion

Goal Statement: Patient will display relief and control of pain symptoms.

Potential complications for the top priority:

- Myocardial infarction
 - Chest pain
 - Pain/discomfort that radiates to the jaw, neck, shoulders, back, or arms
 - Rapid or irregular heart rate
- Impaired physical activity
 - SOB with exertion
 - Pain with exertion
 - Irregular heart rhythm
- Impaired skin integrity
 - Presence of pressure injuries
 - Red, nonblanchable areas on the skin
 - Presence of skin tears

Responding/Taking Actions:

Nursing interventions for the top priority:

- Assess the patient's rating of pain, quality, location, duration, associated symptoms, and aggravated factors every four hours and PRN. (0800, 1200, etc.)
 - Assessing the patient's pain level helps to provide needed interventions regarding pain.
- Raise HOB to 45 degrees when having chest pain PRN.
 - Raising the head of the bed improves breathing by allowing for maximum chest expansion and reduces pressure on the heart. This helps relieve chest pain.
- Monitor vital signs every four hours and PRN. (0800, 1200, etc.)
 - Monitor vital signs to provide information in detecting and monitoring medical problems.
- Monitor lab values for any changes daily.
 - Monitor lab values to determine a patient's overall health and well-being, along with trending their normal values.
- Administer Nitroglycerin 0.4mg SL q5m PRN (0800, 0805, etc.)
 - This medication provides relief or prevention of anginal attacks.
- Administer Aspirin EC 81mg PO daily SCH.
 - This medication helps in the prophylaxis of transient ischemic attacks and MI.
- Administer Atorvastatin 40mg PO daily SCH.
 - This medication helps to reduce triglyceride levels while reducing the risk for a MI and cholesterol in CAD patients.
- Administer Lisinopril 5mg PO daily SCH.
 - This medication lowers blood pressure in hypertensive patients.
- Administer Triamterene /Hctz 37.5-25mg 1 tablet PO daily SCH.
 - This medication treats high blood pressure and edema. (Deglin et al., 2023)
- Educate patient on nutrition and importance of a heart healthy diet on admission and before discharge.
 - A heart healthy diet includes fruits, vegetables, whole grains, lean proteins, and healthy fats. Eating these foods reduce the risk of heart disease and can help with chest pain.
- Educate patient about smoking cessation by discharge.
 - Smoking cessation can decrease the risk of heart related diseases/problems.
- Educate patient about alcohol cessation by discharge.
 - Alcohol cessation can decrease high blood pressure and the risk for heart failure, along with other heart related problems.

Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- Denies chest pain and rates 0/10
- BP 149/70
- HR 74 - Irregular pulse rhythm
- Patient takes shower and ambulates in room independently as needed.
- 2 stents LAD - Cardiac Catheterization Report
- Triglyceride 212H
- Troponin 89.1H
- Smokes cigars daily
- Drinks 5 beers daily
- H/O Coronary Artery Disease
- Heart artery stent

Continue plan of care.

Reference: Deglin, J. H., Vallerand, A. H., & Sanoski, C. A. (2024). *Davis's drug guide for nurses* (19th ed). F. A. Davis Company: Skyscape Medpresso, Inc.