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

**Student Name** _____

**Date** _____

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**Noticing/Recognizing Cues:**

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

**Assessment findings\*:**

**(2/12/25)**

- BP 125/66
- Pulse 76
- Sp02 94% RA
- Temp 98.6 °F
- Numbness/tingling BLE
- Abnormal gait
- Dizziness (at all times)
- Weakness LLE + LUE
- Pain 0/10
- X4 active bowel sounds
- Lungs clear throughout
- Dribbles in brief

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

- Troponin 311.7 H (1/15/25)
- Hct: 26.0 L
- Hgb: 8.6 L              (2/12/25)
- WBC: 2.7 L
- RBC: 2.83 L
- Venous Duplex Positive, left lower posterior tibial DVT (1/26/25)
- CT negative, CTA negative (1/28/25)

**Risk factors\*:**

- 76
- HTN- on medications
- Former smoker
- Osteoporosis
- Assistive Device (walker)
- DM
- Anemia
- Crohn's disease
- Parkinsons

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

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

- Risk for falls
- Risk for DVT
- Risk for PE
- Risk for impaired circulation
- Risk for infection
- Risk for impaired skin integrity
- Risk for constipation
- Risk for decreased activity tolerance
- Risk for sedentary lifestyle
- Risk for ineffective home maintenance behaviors
- Risk for self-care deficit
- Risk for impaired urinary elimination (dribbling)

**Goal Statement:**

**Pt will have impaired stability + BLE strength**

**Potential complications for the top priority:**

- Injury:
  -Sprains
  -Bruises
  -Fractures

  Reduced mobility:
  -Decreased physical activity
  -Weakened muscles
  -Decreased stability/balance

  Psychosocial Effects:
  -anxiety
  -fear of falling
  -social withdrawal

**Responding/Taking Actions:**

**Nursing interventions for the top priority:**

1. Assess BP and HR (+ remaining vitals) q4hr (0800, 1200, 1600, 2000, 2400, 0400)
Rationale: To provide a baseline + to note when abnormalities occur due to cardiac + blood pressure medication

2. Assess musculoskeletal system q4hr
Rationale: to obtain note of current physical injuries that may alter gait or balance

3. Asses cognitive status q4hr
Rationale: affects client's ability to perceive own limitations or recognize danger

4. Administer Carvedilol 12.5 mg PO w/ meals BID (0900, 1500)
Rationale: to decrease pt's BP + prevent hypertensive episodes

5. Administer Cyanocobalamin 1,000 mcg Po qAM (0900)
Rationale: to prevent/decrease anemia

6. Administer Carbidopa-Levodopa 145 mg PO TID (0900, 1400, 2200)
Rationale: to slow Parkinson's disease process in the body

7. Administer Apixaban 5 mg PO BID (0900, 1500)
Rationale: to prevent blood clots, DVTs, Pes, from occurring

8. Implement fall precautions STAT
Rationale: to manage conditions that could contribute to falling + promote a safe environment

9. Encourage + educate client on use of treaded slippers/socks
Rationale: to decrease falls by prevention of slipping

10. Educate client on fall risks such as cords, rugs, etc. in the home upon discharge
Rationale: to decrease incidence of falls in the home setting

11. Provide mental health resources upon discharge
Rationale: to promote mental well-being and increase social activities, as well as ease fears of dslling

(Doenges et al., 2022)

## Evaluation of the top priority:

- Numbness and tingling reported only in LLE, no weakness reported, dizziness is reduced to only when getting out of bed, gait is still abnormal. No new labs were drawn. Risk factors remain as hypertension (due to medications), osteoporosis, assistive walking device, anemia, Parkinson's, and Crohn's disease.

Continue Plan of Care.

**Reference:**

**Doenges, M. E., Moorhouse, M. F., & Murr, A. C. (2022).** *Nurses' pocket guide: Diagnoses,*

*prioritized interventions, and rationales* **(16th ed). F. A. Davis Company: Skyscape**

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