

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

Student Name Eliot Haitonic _____

Date 11/15/25 _____

Noticing/Recognizing Cues:

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

Assessment findings*:

- Blood pressure 189/80
- Impaired musculoskeletal system
- Unsteady gait
- Right shoulder pain
- Impaired balance
- Dementia with agitation
- Skin tear on right shoulder
- Sacral wound
- Wound on right hip
- Decreased functional ability
- Difficulty ambulating
- Decreased intake
- Low fluid intake

Lab findings/diagnostic tests*:

- BMP:
- Chloride - 108 H
 - Creatinine - 0.57 L
 - Glucose - 251 H
 - Magnesium - 1.7 L
 - Total Protein 5.9 L
 - Albumin 3.3 L
 - Potassium - 3.1 L
 - Total creatine kinase - 1617 H
 - Troponin I high sensitivity - 39 H
- UA:
- Urine color - Light orange
 - Urine clarity - Cloudy
 - Urine protein - 70 H
 - Urine glucose - 1000 H
 - Urine ketones - Trace H
 - Urine occult blood - 3+H
 - Urine urobilinogen - 2 H
 - Urine bacteria - 3+ H
 - Urine mucus - 2+ A

Risk factors*:

- Alzheimer's dementia with agitation
- Type 2 diabetes
- Age of 79
- Positive UTI
- Rhabdomyolysis
- Hyperlipidemia
- Pacemaker
- Osteoarthritis of both knees
- Osteoarthritis of the right shoulder

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

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

- Acute UTI
- Impaired skin integrity
- Impaired physical mobility
- Chronic confusion
- Hypertension
- Hypokalemia

Goal Statement:

- Patient will demonstrate improved physical mobility by being able to turn themselves in bed with no assistance.

Potential complications for the top priority:

- Pressure ulcers
- Redness
 - Tenderness
 - Swelling
 - Warmth
- Deep Vein Thrombosis
- Swelling
 - Enlarged veins
 - Redness or bluish tint
- Respiratory Issues
- Shortness of breath
 - Chest pain or tightness
 - Decreased Spo2

Responding/Taking Actions:

Nursing interventions for the top priority:

- 1. Asses the client developmental level, motor skills, and ease and capability of movement, posture, and gait every Q4H.**
Rationale - To determine presence of characteristic of client's unique impairment and to guide choice of intervention
- 2. Determine history of falls and relatedness to current situation every shift.**
Rationale - Client may be restricting activity because of weakens or debilitation, actual injury during a fall, or from physiological distress that can persist after a fall.
- 3. Asses nutritional status and client's report of energy level after each meal.**
Rationale - Deficiencies in nutrients and water, electrolytes, and minerals can negatively affect energy and activity tolerance.
- 4. Determine degree of immobility in relation to 0 to 4 scale, noting muscle strength and tone, joint mobility, cardiovascular status, balance, and endurance every shift.**
Rationale - Identifies strengths and deficits and may provide information regarding potential for recovery.
- 5. Determine degree of perceptual or cognitive impairment and ability to follow directions Q4.**
Rationale - Impairments related to age, chronic or acute disease condition, trauma, surgery, or medications require alternative interventions or changes in plan of care.
- 6. Note emotional/behavioral responses to problems of immobility Q4.**
Rationale - Feelings of frustration or powerlessness may impede attainment or goals.
- 7. Encourage adequate intake of fluids hourly and nutritious foods at each meal.**
Rationale -Promotes well being and maximizes energy production.
- 8. Review importance and purpose of regular exercise at discharge.**
Rationale - (e.g., increased cardiovascular tolerance; improved flexibility, balance, and muscle strength and tone; enhanced sense of well-being).
- 9. Discuss safe ways the client can exercise.**
Rationale - Multiple options provide client choices and variety.
- 10. Demonstrate use of standing aids and mobility devices and have client/care provider demonstrate knowledge about and safe use of device. Identify appropriate resources for obtaining and maintain appliances and equipment.**
Rationale - Promotes safety and independence and enhances quality of life.

(Doenges et al. , 2022)

Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- Patient still had impaired musculoskeletal system, unsteady gait, right shoulder pain, impaired balance, difficulty ambulating, and low intake of fluid and food.
- Patient's potassium improved to within normal limits.
- Their dementia with agitation had gotten worse throughout the days.
- Patient had improved functional ability and was able to meet the goal of demonstrating improved physical mobility by turning in bed by themselves.
- We should modify the plan of care since they were able to meet the goal.

Reference:

Doenges, M.E., Moorhouse, M.F., & Murr, A.C. (2022). Nurse's pocket guide: Diagnoses, prioritized interventions, and rationales (16th ed). F. A. Davis Company: