

Directions: Complete the Nursing Process Study (NPS) and turn in with the Evaluation of Clinical Performance Tool. Due 10 am on Tuesdays. Type legibly all sections of the tool; empty sections will be an automatic "unsatisfactory". Honor HIPAA guidelines.

Date: 1/24/13 Student's Name: Crystal Stable, Francine Smith

Patient Information 3030 C.M.

Code Status: FULL CODE

Precautions: ISOLATION Precautions (Airborne) Neg Pressure Room

Allergies: NKA

Competency 1-b: Correlate the patient's symptoms with the disease process.

Patient's Symptoms on Admission: Lung Mass, Night Sweats with Cough and Sputum production

Competency 6-a: Complete a health history including past & current history & chief concern.

Patient's Chief Concern (In their own words):

List Current history: Presents with URI symptoms associated with weight loss, productive cough, initially treated w/antibiotics

List Past History: Malignant Melanoma over his left upper back just medial to Scapula (2003)

- 2) Hypertension - obstructive Sleep Apnea Left Knee arthroscopy and meniscus surgery (1979)
- 3) Diabetes Type 2 - Renal Calculi
- 4) Hypercholesterolemia - DJD
- Gout - DDD in Genital Region

Any significant family history or client risk factors? Family Cardiac Disorders

Family Anesthesia Reaction

Family History Positive for mother dying from lung cancer

Father died from Heart Disease

Competency 1-e: Evaluate patient's nutritional risks and needs. (Nutrition Ch. 40 page 926-930, Anemia Ch. 31, page 662-672)

Height: 69.02 in	Weight: 112.1 Kg	BMI: 36.5 Kg/m ²	BMI Category: OBESE
Recent Weight Changes:		Vomiting, Diarrhea, Anorexia: N/A	
Wounds: N/A		Current Diet: Regular / HOUSE	
Total Protein: N/A	Albumin: 3.4	Prealbumin:	Transferrin:
Hb: 12.6 (L)	Hct: 38.1 (L)	RBC: 4.27	MCV: 81.6 (L)
Other:			

Describe Your Client's Nutritional Risk: ~~Low~~ but is currently at 112 ~~pounds~~ Kg
Currently 246 lbs - Lost 40 pounds in 6 months

What diet and nutritional education do you recommend?

Recommendation is for a Regular Diet, No restrictions

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Competency 1-f: Assess developmental stage of assigned patient.

Prioritize - Maslow's Hierarchy of Needs:

Priority Maslow's Hierarchy of Needs: Pain Breathing, Airway
Supportive Rationale - Recent Biopsy Surgery on Rt Lung, All pain medications were discontinued - Possible Rationale - Patient may be getting discharged to hospice
Supportive Rationale: -

Competency 2-b: Analyze appropriate assessment skills for the patient's disease process.

What is the major priority nursing assessment? ~~Breathing Airway~~ Impaired Gas Exchange

Supportive rationale: Lung Mass, Maintains Baseline ABG's
Evidences Usual Mental Status
Evidences Usual Skin Color

Competency 6-b and c: Develop 1 priority nursing diagnosis (ND). Validate actual nursing diagnosis through defining characteristics.

ND Priority #1: ~~Surgery Pain R/T Lung Mass Secondary to biopsy surgery~~ Impaired Gas Exchange

Defining Characteristics:

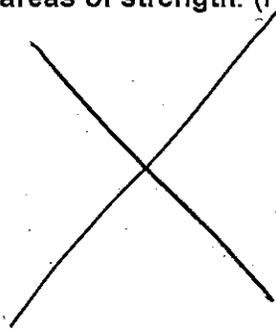
- Pulsox of 97 being maintained by 3L Nasal Cannula
- C/o Cough For duration of Several months
- Wheezes

Competency 3-g: Engage in discussions of evidence-based nursing practice (EBP). Summarize an example of EBP that can be utilized to explore current practice with your patient and what are some possible recommendations for practice. List resource or page from textbook _____.

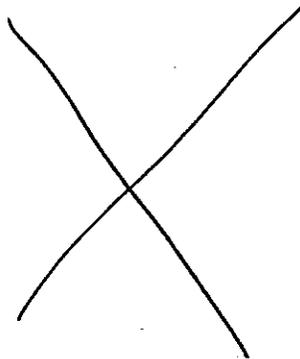
Competency 4-a: Value pt's perspective, diversity, and cultural factors that influence their behaviors. Give examples from clinical.

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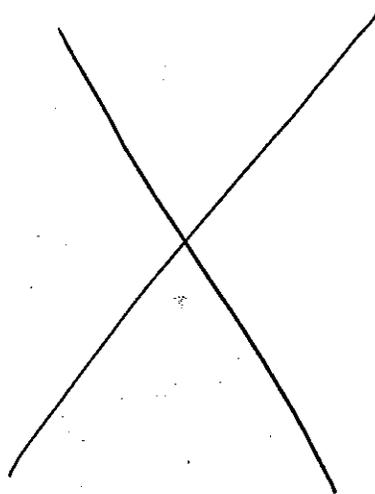
Competency 7-a: Identify areas of strength. (Reflect on one of your strengths from this clinical)



Competency 7-b: Recognize areas for improvement and set goals to meet these needs. (Identify a possible goal you will be able to work on for the next clinical schedule)



Competency 3-f: Calculate medication doses accurately. Complete the math challenge for each week and attach to your Nursing Process Study.



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Highlight all lab tests outside of normal

TEST	RESULT (Initial)	RESULT (Most Recent)	NORMAL RANGE	Give Rationale for any Lab Value outside of norm
HEMATOLOGY				
WBC	9.2		4 - 11 k/mm ³	
RBC	4.67		M 4.20-6 m/mm ³ F 3.85-5.15 m/mm ³	
HGB	12.4		M 14-17 g/dl F 12-15 g/dL	(L) DIT Lung Mass taking up Blood Supply
HCT	38.1		M 41-51 % F 34-46 %	(L) DIT Lung mass taking up BLOOD SUPPLY
MCV	81.6		80 - 98 fl	
PLT	271		150 - 450 k/mm ³	
Neutrophils	75.5		41 - 73 %	(H) DIT Infection in LUNGS
Lymphocyte	16.2		18 - 42 %	(L) DIT Infection and possible leukemia
Monocytes	6.4		2 - 11 %	
Eosinophil	1.3		1 - 3 %	
Basophil	0.6		0 - 2 %	
MANUAL DIFF #				
Neutrophils #	6.9		1.8 - 7.7 x10 ³ /uL	
Lymphocyte #	1.5		1 - 4.8 x10 ³ /uL	
Monocytes #	0.6		0 - 0.8 x10 ³ /uL	
Eosinophil #	0.12		0 - 0.45 x10 ³ /uL	
Basophil #	0.1		0 - 0.2 x10 ³ /uL	
CHEMISTRY				
Glucose	109		70 - 110 mg/dL	
BUN	11		9 - 23 mg/dL	
Creatinine	0.92		0.4 - 1.03 mg/dL	
GFR	260		> 60 ml/min/1.73m ²	
Sodium	140		136 - 146 mEq/L	
Potassium	4		3.5 - 5.1 mEq/L	
Chloride	101		95 - 114 mEq/L	
Total Protein	7.0		6.1 - 8 g/dL	
Albumin	3.4		3.2 - 5.5 g/dL	
Calcium	9.3		8.2 - 10.2 mg/dL	
Total Bilirubin	0.7		0.3 - 1.2 mg/dL	
COAG STUDIES				
PT (Protime)	11.2		10.5 - 12.7 seconds	
APTT	30.8		25 - 37.5 seconds	
INR	1.0		-	
CARDIAC MARKERS				
Troponin			< 0.4 ng/ mL	
BNP			< 100 pg/mL	
ENZYMES				
Alk Phos			38 - 126 U/L	
ALT (SGPT)	13		10 - 60 U/L	
Amylase			25 - 125 U/L	
AST (SGOT)	18		10 - 42 U/L	
CK Total			22 - 269 U/L	
CK MB			0 - 6.3 ng/mL	
LDH			91 - 180 U/L	
Lipase			8 - 57 IU/L	

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TEST	RESULT	RESULT	NORMAL RANGE	REASONING
BLOOD GASES				
pH			7.35 - 7.45	Interpretation of ABG's
Partial CO2			35 - 45 mmHg	
Partial O2			80 - 100 mmHg	
Bicarb			23 - 29 mmol/L	
O2 Sat			95 - 100%	
O2 Concentration			16 - 20.2 vol %	

Other Diagnostic Tests

TEST	DATE	FINDINGS	RATIONALE
AP Erect Chest	1-21-13	Persistent Bibasilar Atelectasis	Left thoracotomy w/ removal of mass, possibly TB
Single AP view of Ast	1/23/13	Air tracking within right main fissure - suggesting small pneumothorax	Secondary Images
Portable chest Xray	1/23/13	Heart size is enlarged - secondary to fluid overload	- to rule out pneumonia
CT of Brain	1/21/13	Negative For Metastatic Disease	Lung mass / history of melanoma
Flexible Bronchoscopy	1/23/13	PENDING	Lg Left Lower LOBE MASS
Mediastinoscopy	1/23/13	PENDING	Lg Left Lower Lobe MASS
PET, SCAN		POSITIVE	

Lab Data Collection created by A. Felder, SN 2003 - modified 2012