



Postoperative Nursing Care: Priority Assessment Finding Following a Total Laryngectomy

Assess for gag reflex

Assess airway patency

Monitor for low O2 and signs of GI bleeding

Cancer Treatment Options: Interventions for a Client Who Has Neutropenia

Assign to private room

Keep plants out of the room

Do not let in sick visitors

Cancer Treatment Options: Nursing Care for a Client Who is Receiving Internal Radiation Therapy

Put the client in a private room

Wear a dosimeter badge

Limit visitors to 30 minutes

Heart Failure and Pulmonary Edema: Instructions for Home Care

Refrain from smoking

Monitor daily weight

Restrict fluids and sodium

Hepatitis and Cirrhosis: Educating Staff About Hepatitis A

Risk factors include ingesting contaminated water or food

Contact with infected stool through sex or incontinence

AST and ALT are elevated in hep A patients

Immunizations: Recommended Vaccinations for Older Adult Clients

Pneumococcal

Meningococcal

Herpes Zoster

Preoperative Nursing Care: Priority Action for a Client Who Has Alcohol Intoxication

Legal guardian or healthcare surrogate can sign consent form if patient is unable to

NPO before most operations

Avoid smoking, drinking, or drug use before operations due to possibility of reaction with surgical medications

Arthroplasty: Nonpharmacological Interventions Following Total Knee Arthroscopy

Avoid pillows placed behind knees

Keep heels off bed with pillows or blanket

Ice or cold therapy to the incision

Disorders of the Eye: Priority Action for Eye Irrigation

Remove foreign body by irrigating for at least one minute

Continue to irrigate for up to 15 minutes

Apply heat or cold to the eye

Musculoskeletal Trauma: Preventing Complications

Ensure adequate calcium and vitamin D intake

Assess cap refill and pulses distal

Monitor sensation and color of skin

Pressure Ulcers, Wounds, and Wound Management: Implementing Preventative Strategies

Keep skin dry and intact

Turn the patient every two hours

Keep heels off of bed and make sure patient is upright and has not slid down in bed

Stroke: Caring for a Client Who Has Left-Sided Hemiplegia

Monitor for fever because it can increase ICP

Put client on cardiac monitor

Assess gag reflex before feeding

Female Physiologic Processes: Teaching About Adverse Effects of Leuprolide

Can cause birth defects

Decreases libido

Can increase risk of osteoporosis

Nutrition Assessment/ Data Collection: Caring for a Client Who Has Pancreatitis

High protein diet

Small meals 5 to 6 times a day

Avoid red meat and fatty foods

Opioid Agonists and Antagonists: Client Teaching About Opioid Use

Cough to get rid of accumulation of secretions

Void every 4 hours

Risk of respiratory depression

Pharmacokinetics and Routes of Administration: Discharge Teaching About a Metered-Dose Inhaler

Shake vigorously 5 to 6 times

Hold inhaler 2-4 cm from the mouth

Hold breath for 10 seconds to ensure medication gets into airway

Head Injury: Monitoring Neurological Status

Monitor ICP

Monitor GCS

Report presence of clear liquid (CSF) to provider

Seizures and Epilepsy: Planning Care for a Client Who Has Status Epilepticus

Maintain airway and provide oxygen

Establish IV and perform ECG monitoring

Monitor Pulse oximetry and ABGs

Anemias: Manifestations of Anemia

Low number of RBCs in circulation

Low hemoglobin

Pallor and numbness of extremities are expected assessment findings

Burns: Assessment Findings of Early Phase of Injury

Hypovolemia including hypotension, decreased cardiac output, and tachycardia

Possible inhalation damage related to singed nose hairs, sooty sputum, and hoarseness

Headache, weakness, and confusion

Burns: Care of a Client Following an Explosion

Use rule of 9s to assess burns

Lactated ringer for fluid resuscitation

Supplemental oxygen

Diagnostic and Therapeutic Procedures for Female Reproductive Disorders: Client Teaching About Genital Herpes

Culture of lesion, PRC test, and antibody test are all diagnostic ways to confirm genital herpes

ELSA test can confirm whether HS1 or HS2

Herpes is contracted through contact so latex condom usage is important

Electrocardiography and Dysrhythmia Monitoring: Identifying First-degree Heart Block

PR interval of over 0.2 seconds

1 to 1 ration between P and QRS complexes

AV node is blocked

Electrolyte Imbalances: Treatment for Hypokalemia

Oral or IV potassium

Aldactone prescribed

Ensure diet of foods high in potassium after treatment, but do not eat while undergoing potassium IV treatment, as it can lead to hyperkalemia.

Hemodynamic Shock: Client Positioning

Trendelenburg position is priority positioning

Monitor airway

Have resuscitation equipment at bedside

Hepatitis and Cirrhosis: Priority Finding to Report

Jaundice

Flulike symptoms including abdominal pain and fatigue

Dark colored urine and clay-colored stools

Hypertension: Actions for Hypertensive

Monitor potassium and watch for muscle weakness

Give antihypertensive medications

Monitor blood pressure before giving medications and after (if in crisis, monitor every 5-15 minutes)

Nasogastric Intubation and Enteral Feedings: Selecting Equipment for Gastric Lavage

NG tube used for stomach decompression and gastric lavage

Different tube types include Ewald, Levin, and Salem Sump

Water soluble lubricant is used to insert the NG tube