N311 Care Plan #

Lakeview College of Nursing

Shanique Williams

Demographics (5 points)

Date of Admission 9-27-2022	Client Initials S.E	Age 54	Gender Female
Race/Ethnicity Caucasian	Occupation Disability	Marital Status Single	Allergies No Known
Code Status Full code	Height 5'6	Weight 190 Lb.	

Medical History (5 Points)

Past Medical History: Asthma, Autism, Diabetes mellitus (HCC), Hypertension, Stoke (HCC). Hypertensive emergency 9-28-22, acute encephalopathy due to subacute stroke and seizures 10-3-2022

Past Surgical History: Ankle surgery (right) and Hip Facture surgery (right) 5-3-2022

Family History: Not on file

Social History (tobacco/alcohol/drugs including frequency, quantity and duration of use): The client reports that she has been smoking about 2 packs per day. She has never used smokeless tobacco. The client reports previous alcohol use, reports previous drug use.

Admission Assessment

Chief Complaint (2 points): Possible Stroke

History of Present Illness – OLD CARTS (10 points): The client is a 54-year-old female with past medical history of hypertension, hyperlipidemia, autism, CVA who presented to the hospital with complaints of possible stroke on admission. Patient was found to have aphasia and elevated blood pressure. Client appeared to have a spastic withdrawal to left hand. after coming to the hospital, the client had small outburst of anger, but soon calmed down when asked to. Upon my

visit, the client was observed talking to oneself and confused. The client was not in the right head space to answer questions about seeking treatment.

Primary Diagnosis

Primary Diagnosis on Admission (3 points): Seizures (HCC)

Secondary Diagnosis (if applicable): Acute kidney injury superimposed on chronic kidney disease (HCC): 8-7-2021, Stage IV kidney disease, CVA (cerebral vascular accident) (HCC)/ subacute in multiple vascular territories: 12-31-2021

Pathophysiology of the Disease, APA format (20 points): Seizures are uncontrolled electrical disturbances in the brain. Seizures can cause changes in movement, behavior, and feeling, especially the level of consciousness. Seizure can cause you to lose oxygen to the brain and can be deadly. If you have two or more seizures back-to-back within 24 hours could be considered epilepsy (Mayo Clinic, 2021) There are different types of seizures, just to name a few there are absence seizures, tonic seizures, and atonic seizures. Most seizures last from 30 seconds to about two minutes, any seizure that can last longer than five minutes is considered a medical emergency and should be treated as such. According to Mayo Clinic, seizures can happen after a person has a stroke and any other illness. It's good to take medication that way you can have some control over the this disorder. Symptoms of seizures can range any where from mild to severe and this all depends on the type of seizures you are having. You can have confusion, cognitive or emotional symptoms, such as fear, sadness, or anxiety. It is good to see a doctor when your seizures are consistent and last more than 5 minutes, or when you have high fevers, pregnant, any other health conditions, or even when another seizures comes after the first one. though seizures can be

treated with medication and other treatments, there can be complications when you are experiencing seizures. You can have car accidents, drowning, emotional health issues and other associated factors as well. The type of diagnostic test that are done when a person has epilepsy or experience seizures are a neurological exam (Johns Hopkins, 2021). With this the doctor will watch your behavior, monitor your mental functioning to determine if there is any issues in your brain. A blood test to check sugar levels and any signs that indicate infection, an EEG can be performed to record the electrical activity in your brain and those just to name a few (John Hopkins, 2021). There are others such as MRI, CT, PET which are imaging testing to create a detailed view of what's going on in the brain (Johns Hopkins, 2021)

Pathophysiology References (2) (APA):

Mayo Clinic. "Seizures." *Mayo Clinic*, Mayo Foundation for Medical Education and Research, 24 Feb. 2021, https://www.mayoclinic.org/diseases-conditions/seizure/diagnosis-treatment/drc-20365730.

Johns Hopkins Staff. "Types of Seizures." *Johns Hopkins Medicine*, 8 Aug. 2021, https://www.hopkinsmedicine.org/health/conditions-and-diseases/epilepsy/types-of-seizures.

Laboratory Data (20 points)
If laboratory data is unavailable, values will be assigned by the clinical instructor

CBC Highlight All Abnormal Labs—Explanations must be in complete sentences and contain in-text citations in APA format.

Lab	Normal Range	Admission Value	Today's Value	Reason for Abnormal Value
RBC	4.40-5.80	6.50	4.26	The client has liver and kidney disease. (Pagana, 2019)
Hgb	13.0-16.5	19.4	12.7	The client has liver and kidney disease. (Pagana, 2019)
Hct	38-50	57.9	38.2	The client has liver and kidney disease. (Pagana, 2019)
Platelets	140-440	308	210	
WBC	4.00-12.00	9.40	7.40	
Neutrophils	40.0-68.0	92.3	81.8	The client has liver and kidney disease. (Pagana, 2019)
Lymphocytes	19.0-49.0	4.5	8.9	The client has liver and kidney disease. (Pagana, 2019)
Monocytes	3.0-13.0	1.6	7.7	The client has liver and kidney disease. (Pagana, 2019)
Eosinophils	0-8.0	0.3	1.1	
Bands	10% or less	N/A	N/A	

Note: Bands not obtained during visit

Chemistry Highlight All Abnormal Labs—Explanations must be in complete sentences and contain in-text citations in APA format.

Lab	Normal Range	Admission Value	Today's Value	Reason For Abnormal
Na-	133-144	133	138	
K+	3.5-5.1	3.9	3.4	The client has liver disease. (Pagana, 2019)
Cl-	98-107	95	106	The client has kidney disease. (Pagana, 2019)
CO2	21-31	28	25	

Glucose	**70-99**	**193**	**95**	**The client has kidney disease. (Pagana, 2019)**
BUN	**7-25**	**29**	**23**	**The client has liver disease. (Pagana, 2019)**
Creatinine	**N/A**	**N/A**	**N/A**	
Albumin	**3.5-5.7**	**4.3**	**N/A**	
Calcium	**8.8-10.2**	**10.2**	**9.1**	
Mag	**1.3-2.1**	**2.3**	**N/A**	
Phosphate	**N/A**	**N/A**	**N/A**	
Bilirubin	**0.2-0.8**	**N/A**	**N/A**	
Alk Phos	**34-104**	**100**	**N/A**	

Urinalysis Highlight All Abnormal Labs—Explanations must be in complete sentences and contain in-text citations in APA format.

Lab Test	Normal Range	Value on Admission	Today's Value	Reason for Abnormal
Color & Clarity	**Clear-yellow**	**Clear yellow**	**N/A**	
pH	**5.0-9.0**	**7.5**	**N/A**	
Specific Gravity	**1.003-1.030**	**1.020**	**N/A**	
Glucose	**Negative**	**1+**	**N/A**	**The client has kidney disease. (Pagana, 2019)**
Protein	**Negative**	**4+**	**N/A**	**The client has kidney disease. (Pagana, 2019)**
Ketones	**Negative**	**Negative**	**N/A**	
WBC	**Negative 0-5**	**0-5**	**N/A**	
RBC	**Negative 0-2**	**0-2**	**N/A**	
Leukoesterase	**N/A**	**N/A**	**N/A**	

Cultures Highlight All Abnormal Labs—Explanations must be in complete sentences and contain in-text citations in APA format.

Test	Normal Range	Value on Admission	Today's Value	Explanation of Findings
Urine Culture	**No growth**	**N/A**	**N/A**	
Blood Culture	**No growth**	**N/A**	**N/A**	
Sputum Culture	**No growth**	**N/A**	**N/A**	
Stool Culture	**No growth**	**N/A**	**N/A**	

Note: No urine, sputum, stool obtained during visit

Lab Correlations Reference (1) (APA): Pagana, Kathleen. (2019). Mosby's Diagnostic and Laboratory Test Reference, (14th ed.). Elsevier.

Diagnostic Imaging

All Other Diagnostic Tests (10 points): CT head without contrast, reason altered mental status and slurred speech: hypertension.

Finding: There is evidence of prior infarction involving the left corona radiata and the left thalamus signs and symptoms of infarction include tightness or pain in the chest, neck, and back or arm. Abnormal heartbeat and anxiety.

Diagnostic Imaging Reference (1) (APA): Phelps, L. L. (2020). In *Spark's & Taylor's Nursing Diagnosis Reference Manual* 11th ed. essay,

Wolters Kluwer.

Current Medications (10 points, 2 points per completed med)
5 <u>different</u> medications must be completed

Medications (5 required)

Brand/Generic	**Hydralazine (apresoline)**	**Labetalol (Normodyne;Trandate)**	**Lorazepam (Ativan)**	**Heparin (Porcine)**	**Clondine (Catapres)**
Dose	**10 mg**	**10 mg**	**1 mg**	**5,000 units**	**0.2 mg**
Frequency	**Every 1-hour prn**	**Every 1-hour prn**	**Every 12 hours prn**	**3 times day**	**2 times daily**
Route	**injection**	**injection**	**Oral**	**injection**	**Oral**
Classification	**Antihypertensive**	**Antihypertensive**	**Anxiolytic**	**Anticoagulant**	**Analgesic, antihypertensive behavior modifier**

Mechanism of Action	**Dilates arteries, not veins, which minimizes orthostatic hypotension and increases cardiac output and cerebral blood flow. Has a positive inotropic effect on the heart. (Jones & Bartlett Learning, 2023)**	**Selectively blocks alpha 1 and beta 2 receptors in vascular smooth muscles and beta 1 receptors in heart to reduce blood pressure and peripheral vascular resistance. (Jones & Bartlett Learning, 2023)**	**Lorazepam hyperpolarizes neuronal cells, thereby interfering with their ability to generate seizures. (Jones & Bartlett Learning, 2023)**	**At low doses, heparin inhibits factor Xa and prevents conversion of prothrombin to thrombin. Thrombin is needed for conversion of fibrinogen to fibrin; without fibrin, clots won't form. (Jones & Bartlett Learning, 2023)**	**Vascular resistance, and systolic and diastolic blood pressure. (Jones & Bartlett Learning, 2023)**
Reason Client Taking	**Low heart rate less than 60**	**High heart right greater than 60**	**Agitation**	**Prevent blood clots**	**High blood pressure**
Contraindications (2)	**Coronary heart disease. Mitral valvular rheumatic heart disease.**	**Overt heart failure. Second- or third-degree heart block, severe bradycardia.**	**Acute angle-closure glaucoma, hypersensitivity to lorazepam**	**Heparin-induced Thrombocytopenia, hypersensitivity to heparin**	**Anticoagulant therapy (epidural infusion), hypersensitivity to clonidine and or its components.**
Side Effects/Adverse	**Orthostatic hypotension**	**Bradycardia, heart failure,**	**Seizures, slurred**	**Thrombosis,**	**Agitation, bradycar**

Reactions (2)	**, Tachycardia.**	**hypotension**	**speech**	**heparin-induced thrombocytopenia**	**dia, congestive heart failure**

Medications Reference (1) (APA): Jones & Bartlett Learning, (2023). Nurse's Drug Handbook (22nd ed.). Jones & Bartlett

Assessment

Physical Exam (18 points) – HIGHLIGHT ALL PERTINENT ABNORMAL FINDINGS

GENERAL: **Alertness:** **Orientation:** **Distress:** **Overall appearance:**	**Alert, oriented to person, place.** **Alert and responsive** **No acute distress** **Well groomed**
INTEGUMENTARY: **Skin color:** **Character:** **Temperature:** **Turgor:** **Rashes:** **Bruises:** **Wounds:** . **Braden Score:** **Drains present: Y☐ N ☒**	 **White skin** **Intact, dry** **Skin warm** **No rashes** **No bruises** **No wounds** **Braden score = 15**

Type:	
HEENT: **Head/Neck:** **Ears:** **Eyes:** **Nose:** **Teeth:**	**Head is round symmetrical of skull and face** **Trachea is midline no deviation** **No drainage or ear wax** **Bilateral sclera, white** **Missing front teeth**
CARDIOVASCULAR: **Heart sounds:** **S1, S2, S3, S4, murmur etc.** **Cardiac rhythm (if applicable):** **Peripheral Pulses:** **Capillary refill:** **Neck Vein Distention: Y ☐ N ☒** **Edema Y ☐ N ☒** **Location of Edema:**	**.S1 and S2 heard, no murmur.** **Chest is clear to auscultation, with regular sinus rhythm.** **Peripheral pulse regular** **Capillary refill less than 2**
RESPIRATORY: **Accessory muscle use: Y☐ N ☒** **Breath Sounds: Location, character**	**The pulmonary effect is normal breath sounds are clear throughout** **Clear throughout**
GASTROINTESTINAL: **Diet at home:** **Current Diet** **Height:** **Weight:** **Auscultation Bowel sounds:** **Last BM:** **Palpation: Pain, Mass etc.:** **Inspection:** **Distention:** **Incisions:** **Scars:** **Drains:** **Wounds:** **Ostomy: Y ☐ N ☒** **Nasogastric: Y ☐ N ☒** **Size:** **Feeding tubes/PEG tube Y ☐ N ☒** **Type:**	**Regular diet** **Regular diet** **5’6** **190 lbs.** **No irregular bowel sounds** **10/3/2022** **Abdomen is soft** **Skin is intact with no scaring, bruising** **No incisions** **No scars** **No drains** **No wounds**
GENITOURINARY: **Color:** **Character:** **Quantity of urine:**	**Yellow/clear** **Continent to toilet**

Pain with urination: Y ☐ N ☒ **Dialysis: Y ☐ N ☒** **Inspection of genitals:** **Catheter: Y ☐ N ☒** **Type:** **Size:**	
MUSCULOSKELETAL: **Neurovascular status:** **ROM:** **Supportive devices:** **Strength:** **ADL Assistance: Y☒ N ☐** **Fall Risk: Y ☒ N☐** **Fall Score: 50** **Activity/Mobility Status:** **Independent (up ad lib)** **Needs assistance with equipment** **Needs support to stand and walk**	. **Extremity intact, no swelling, no edema present** **Full ROM of all body joints** **Client uses a gait belt when getting assistance** **Grip equal bilaterally** **No DVT in legs** **Can walk alone/ but needs assistance sometimes with gate belt**
NEUROLOGICAL: **MAEW: Y ☒ N☐** **PERLA: Y ☒ N☐** **Strength Equal: Y ☒ N ☐ if no -** **Legs ☐ Arms ☐ Both ☒** **Orientation:** **Mental Status:** **Speech:** **Sensory:** **LOC:**	**Alert and oriented to person, place.** **Client was agitated** **Speech was slurred** **Client doesn't wear any contacts/glasses** **No changes in LOC**
PSYCHOSOCIAL/CULTURAL: **Coping method(s):** **Developmental level:** **Religion & what it means to pt.:** **Personal/Family Data (Think about home environment, family structure, and available family support):**	. **The client lives with family** **The client is a Christian.**

Vital Signs, 1 set (5 points) – HIGHLIGHT ALL ABNORMAL VITAL SIGNS

Time	Pulse	B/P	Resp Rate	Temp	Oxygen
7:11 am	59	158/78	20	97.7	99/ room air

Pain Assessment, 1 set (5 points)

Time	Scale	Location	Severity	Characteristics	Interventions
7:11 am	**0-10**		**0**		

Intake and Output (2 points)

Intake (in mL)	Output (in mL)
480 mL	**Patient was continent to toilet, couldn't obtain urine output**

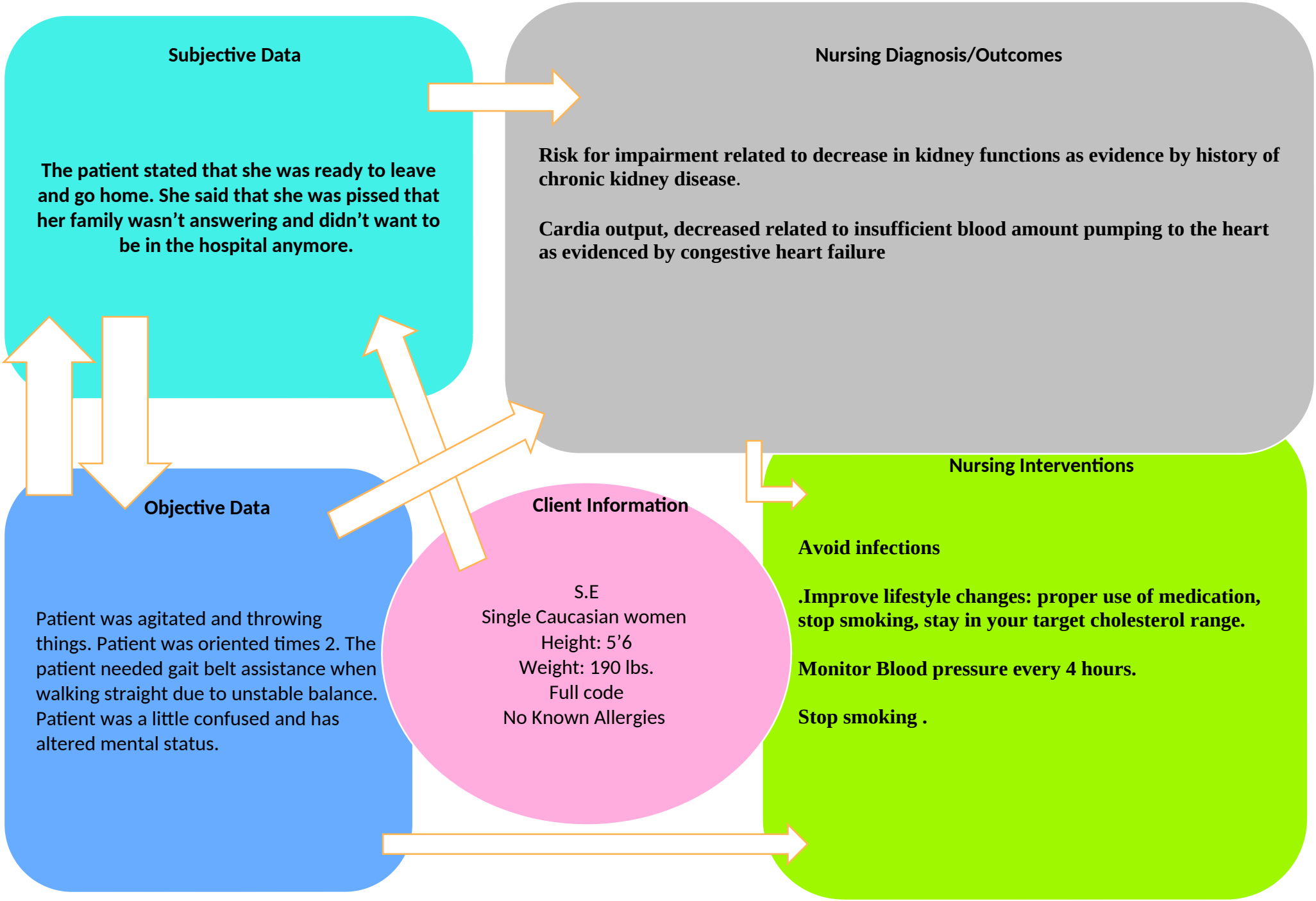
Nursing Diagnosis (15 points)
Must be NANDA approved nursing diagnosis

Nursing Diagnosis • Include full nursing diagnosis with "related to" and "as evidenced by" components • Listed in order by priority – highest priority to lowest priority pertinent to this client	Rationale • Explain why the nursing diagnosis was chosen	Interventions (2 per dx)	Outcome Goal (1 per dx)	Evaluation • How did the client/family respond to the nurse's actions? • Client response, status of goals and outcomes, modifications to plan.
1. Risk for impairment related to decrease in kidney functions as evidence by history	**The client has stage IV kidney disease**	**1.Avoid infections 2.improve lifestyle changes: proper use of medication,**	**1. patient will have normal levels to prevent progression of chronic kidney disease**	**patient followed proscribed treatment**

of chronic kidney disease		**stop smoking, stay in your target cholesterol range.**		
2. Cardia output, decreased related to insufficient blood amount pumping to the heart as evidenced by congestive heart failure	**The client has a history of hypertension**	**1. monitor b/p every 4 hours** **2.stop smoking**	**1. patient will have b/p rate in normal ranges**	**Blood pressure should be checked regularly, and blood pressure stays in the normal range. Patient didn't obtain this goal.**

Other References (APA):

Concept Map (20 Points):


Subjective Data
The patient stated that she was ready to leave and go home. She said that she was pissed that her family wasn't answering and didn't want to be in the hospital anymore.
Nursing Diagnosis/Outcomes
Risk for impairment related to decrease in kidney functions as evidence by history of chronic kidney disease.
Cardia output, decreased related to insufficient blood amount pumping to the heart as evidenced by congestive heart failure
Objective Data
Patient was agitated and throwing things. Patient was oriented times 2. The patient needed gait belt assistance when walking straight due to unstable balance. Patient was a little confused and has altered mental status.
Client Information
S.E
Single Caucasian women
Height: 5'6
Weight: 190 lbs.
Full code
No Known Allergies
Nursing Interventions
Avoid infections
.Improve lifestyle changes: proper use of medication, stop smoking, stay in your target cholesterol range.
Monitor Blood pressure every 4 hours.
Stop smoking .