

Assessment of Client/Family (5 points)	Nursing Diagnosis & Goal of Teaching (5 points)	Interventions (5 points)	Methods/Teaching Tools (2 points)	Evaluation (3 points)
<p><b>Level of motivation for learning:</b></p> <p>Her motivation for learning is high. When I was in her room with the wound nurse, she paid attention and listened to everything the wound nurse and provider did to her.</p> <p><b>Barriers to effective learning:</b></p> <p>The only barrier she may have to effective learning is her husband distracting her. They live in the same room together, and he often talks to everyone around.</p> <p><b>Health beliefs/values:</b></p> <p>The patient values her health and is often getting assistance with it. The wound provider sees her weekly to reassess the abscess on her breast. The</p>	<p><b>Nursing Diagnosis:</b></p> <p>Anxiety related to stressors as evidenced by medical situations going on.</p> <p><b>Goal of Teaching:</b></p> <p>The client's anxiety will be rated lower on a scale of 1-10 by the new year.</p>	<p><b>Intervention 1:</b></p> <p>Explain to the patient anything the nurse or provider may be doing for them, for example, dressing change, what medicines help with what, and procedures (Phelps, 2023).</p> <p><b>Intervention 2:</b></p> <p>Do anything to make the patient more comfortable to increase trust</p> <p><b>Intervention 3:</b></p> <p>Talk to the patient about what they may feel anxious about. Listen attentively.</p>	<p><b>Method 1:</b></p> <p>I will discuss anxiety-reducing methods with the client and ask if she has any questions.</p> <p><b>Method 2:</b></p> <p>I will ask the client to tell me what she learned today (teach-back method).</p>	<p><b>Discuss how the client/family received the teaching:</b></p> <p>I expect the client to be very receptive to my teaching. She always seems to be interested in learning about new things and actively listens when being spoken to.</p> <p><b>Identify strengths/weaknesses of the client or family in receiving teaching:</b></p> <p>I expect a weakness to be that she may feel embarrassed to talk about her anxiety with me. I think this way because the older generation did not talk about mental health as much as it is spoken of now.</p>

client is always willing to let the provider do her job and help in any way possible.

**Psychosocial development:**

The patient lives with her husband and seems to enjoy it. She often visits with others who live in the facility. She also identifies with the Baptist religion.

**Cognitive development:**

The client's cognitive development is appropriate to her age. She knows when someone is talking to her and engages well in conversations with others in the facility, along with employees.

**Suggest modifications to improve the teaching plan (what would have improved the plan?):**

I expect this plan will not need any modifications as long as the husband is not in the room with her and she feels comfortable talking with me.

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**References (2) (APA): (5 points)**

Ally Hirschlag. (2020, December 19). *Do you live with anxiety? Here are 11 ways to cope*. Healthline; Healthline Media.

<https://www.healthline.com/health/mental-health/how-to-cope-with-anxiety>

Phelps, L. L. (2023). *Nursing Diagnosis Reference Manual* (Twelfth). Wolters Kluwer.