

N311 Care Plan 1

Cheyenne Walls

Lakeview College of Nursing

N311: Foundations of Professional Practice

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2/13/2024

Demographics (5 points)

Date of Admission 2/7/2024	Client Initials D.D.	Age 81	Gender Male
Race/Ethnicity White	Occupation Retires (Heat Craft)	Marital Status Married	Allergies No Known
Code Status Full	Height 5'10"	Weight 200 (90.7Kg)	

Medical History (5 Points)

Past Medical History: Age related nuclear cataract on left eye 12/03/20; Age related nuclear cataract of right eye 12/10/20; Ulcerative Colitis (HCC) 3/14/18; BPH (benign prostatic hyperplasia); Carcinoma (HCC) high grade angiosarcoma stage IV; History of colectomy; Post colectomy (3/29/11); Hyperlipemia; Hypertension (12/2/10)

Past Surgical History: Partial hip arthroplasty Right (1/26/24); Umbilical Hernia repair; Cataract removal left (12/03/20); Cataract removal right (12/10/20); Central venous catheter left (1/29/24); Colostomy; Endoscopy, Colon, Diagnostic (12/20/12); Joint replacement x2 Shoulder.

Family History: Father- Cancer; Paternal Grandmother- Cancer; Maternal Grandmother- Cancer

Social History (tobacco/alcohol/drugs including frequency, quantity and duration of use):
Former Smoker- Cigarettes quit 1998. Never used- smokeless, vaping, or drugs. Alcohol- not currently.

Admission Assessment

Chief Complaint (2 points): Vomiting with no blood, Diarrhea- watery stool with no blood.

History of Present Illness – OLD CARTS (10 points):

O- 1 day prior to ED

L- no specific location determined for chief complaint

D- more recent onset however unable to identify how long

C- vomiting/ diarrhea

A -Chemo

R- unknown/ pain meds

T- Patient has not sought treatment for this chief complaint before however patient had recent admission on 1/19/24 for hip pain

S- 3/10

Primary Diagnosis

Primary Diagnosis on Admission (3 points): Gastroenteritis related to chemotherapy

Secondary Diagnosis (if applicable): N/A

Pathophysiology

Pathophysiology of the Disease, APA format (20 points):

The disease for my patient is Gastroenteritis. Gastroenteritis is the “inflammation of the GI lining caused by a pathogen.” This can also cause stress on your organs like the large intestine, small intestine, and stomach. This can lead to dehydration which can be very dangerous depending on the patient's age.

The impact that certain cytotoxins and viruses have on intestinal enterocytes is what causes the clinical signs and symptoms of viral gastroenteritis (Steumpfig and Seroy, 2023). The virus makes copies of itself by hijacking the cells in your gut, messing with the enzymes on the tiny hairs lining your intestines, and causing inadequate absorption and diarrhea that is osmotic. Moreover, the enterocytes and intestinal villa are directly damaged by viral toxins, which results in cell lysis and the leak of fluid into the colon. If transport in cells stops working right, it can mess up the balance of electrolytes. This could also throw off the body's acid levels. Then the virus can leave the body through poop and sometimes throw up aka vomit. The peak viral load in the stool appears 24 to 48 hours after the onset of symptoms. According to some research, virus shedding might continue for several weeks after symptoms appear.

There are several different kinds of signs and symptoms of Gastroenteritis. The F.A. Davis book shared the signs, symptoms, physical assessment, diagnostic testing, and treatments. These signs and symptoms consist of “frequent episodes of watery diarrhea, weight loss, fatigue, and a possible fever” (F.A Davis, p. 725, 2020). The physical assessment findings could be “auscultation of borborygmi.” Borborygmi is a sound that your stomach makes that sounds like a rumbling or gurgling noise. The diagnoses testing shows the “presence of bacteria or virus in

serum or stools, and dehydration and electrolyte imbalance.” The treatment can be “fluid and electrolyte replacement to treat dehydration, antibiotics to eradicate bacteria.”

Pathophysiology References (2) (APA):

References

Capriotti, T. (2020). *Davis advantage for pathophysiology: Introductory concepts and clinical perspectives* (2nd ed.). F.A. Davis.

Steumpfig, N. D., & Seroy, J. (2023, June 12). *Viral Gastroenteritis*. Retrieved February 14, 2024, from <https://www.ncbi.nlm.nih.gov/books/NBK518995/>

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

Time	Pulse	B/P	Resp Rate	Temp	Oxygen
0853	93	125/55	18	98.6F	96%

Pain Assessment, 1 set (5 points)

Time	Scale	Location	Severity	Characteristics	Interventions
1000	Numerical 1-10	Hip	3/10	Achy	Hydrocodone Tylenol Bedrest