

## Discussion Questions

Is the setting appropriate to care for this client? Why or why not?

Yes, because she is in a medical surgical unit for post-op observation and care. There, the nursing team checked on her and managed her care by addressing her pain and monitoring her incision site. They also helped educate her on how to care for her incision site properly.

- What considerations (culture, literacy, religious, diet, economic, education, pronouns, gender identity, etc.) should you address when caring for this client?

Knowing the patient's pronouns and gender is crucial for addressing her respectfully, just like understanding her culture and religion. This information helps us provide care that aligns with her beliefs and avoids any unintentional offense. Effective communication and sensitivity to these aspects build trust and rapport with the patient. If a mistake happens, a sincere apology can strengthen the bond between the nurse and the client.

- What resources or supplies will you need when caring for this client?

You'd need her NG tube supplies to clean and drain it, along with new dressing and cleaning supplies for her incision site. It's essential to have everything ready for her care.

## Clinical Judgement Questions

Questions must be answered completely (at least a paragraph and if you use outside sources please reference the sources) Upload to drop box

### Recognize Cues (Assessment)

- Was the report effective for you to care for this client?
- What information is missing from the scenario and is needed to effectively care for the client?
- What information was relevant to the client's condition?
- What subtle changes did you recognize in the client's condition? What condition were the subtle changes in the client's health status related to?

When I got the report, it had some good details about what had been done and which post-op day we were on, but it was missing some key information. The missing information included her admission report from the emergency room, which would have provided her past medical, surgical, and family history, her chief complaint, current medications, code status, lab results from the emergency room, and the times vitals were taken. During the physical exam, they didn't mention when she last urinated or had a bowel movement. Relevant information to her condition included the procedure performed, the post-op day, the incision site assessment, the IV site assessment, and the respiratory assessment. A subtle change was her pain level, which decreased over the days, allowing her to ambulate. This improvement positively impacts her health status because decreasing pain and increased mobility promote good circulation and

prevent muscle weakness. Her NG tube went from low suction to gravity and was eventually removed, reducing the risk of electrolyte imbalance.

#### Analyze Cues (Analysis)

- Compare the client findings to the evidence-based resources and standards of care.
- What are the specific needs of this client?
- What are the potential complications this client may experience?
- What findings are of immediate concern for this client?

It seems like the patient's pain level was at a 4 out of 10, located in the lower right abdomen. The incision site appeared clean, dry, and intact. Her lungs sounded clear, with equal breath sounds on both sides and 99% oxygen saturation on room air. The patient has been prescribed pain medication to manage the pain and should use a spirometer to maintain lung function, promoting lung health and preventing complications. While the incision site looks normal, it's essential to continue monitoring it for any signs of abnormal bleeding or infection. It's reassuring that there are no immediate concerns noted, as having decreased bowel sounds is common post-appendectomy. The patient's pain level and vitals are within normal ranges after surgery.

#### Prioritize Hypotheses (Analysis)

- Identify and rank the top three problems for this client. Provide a rationale for your decision on the rank order.

The patient was on a low suction rate, which could have led to an electrolyte imbalance because her body wasn't absorbing nutrients as effectively as it would naturally. This imbalance can slow down the healing process. Even though she rated her pain at a 4 out of 10 while lying in bed, it's important to note that she is one day post-op and not moving much. Encouraging movement is crucial for maintaining muscle strength and promoting gastrointestinal function. Pain medication can help reduce her discomfort, potentially encouraging her to get up and move more. Additionally, there's a risk for infection at the incision site from the appendectomy. Although it appeared clean, dry, and intact on the first day post-op, there's still a possibility of infection. Educating her on proper care and how to change dressings, as well as informing her about the signs and symptoms of infection, is essential to reduce this risk and ensure she can notify us promptly if any issues arise.

#### Generate Solutions (Planning)

- What interprofessional health care team member will need to be included in establishing a plan of care?

It's important for the healthcare team to involve various professionals in the patient's care to ensure the incision site heals properly. This team should include the surgeon who performed the appendectomy, the anesthesiologist, the patient's primary care provider, a nurse, a pharmacist, a social worker, and possibly a wound care provider. Having this comprehensive team can help monitor the healing process effectively and address any issues that may arise.

#### Take Actions (Implementation)

- Identify the nursing actions that should be taken based on the prioritized client problems.

- Identify the potential impact the nursing action has on the client outcomes.

To monitor the patient's electrolyte status and check for signs of infection, it's recommended to have a Complete Blood Count (CBC) drawn daily. This can help track electrolyte levels and monitor the White Blood Cell (WBC) count for any indications of infection. Since the patient is on D5 ½ normal saline IV and NG suction, maintaining appropriate electrolyte levels is crucial to prevent complications. Detecting early signs of infection allows for timely initiation of antibiotic treatment to prevent the infection from worsening or spreading. If the patient agrees, administering the prescribed pain medication can help manage discomfort and encourage movement. Increasing ambulation can support muscle strength and gastrointestinal function, preparing the patient for transitioning from a clear liquid to a solid food diet by facilitating proper movement of food through the GI system.

Evaluate Outcomes (Evaluation)

- What responses by the client would indicate that the nursing actions were effective?
- What are the safety concerns you identified caring for the client(s)?

The patient would be able to ambulate more frequently with less pain, and it's important to regularly ask her to rate her pain on a scale of 0-10. Her lab results should ideally show normal values and no signs of infection. However, there are still some safety concerns to keep in mind, such as the risk of infection, the risk of falls, and the potential for hypervolemia or hypovolemia.

Reflection Questions

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Evaluate your ability to care for the client(s). What did you do well, and what could have been improved?

- Discuss what information you would need to know prior to caring for this client if you could do this over.
- What do you know now that you did not know prior to completing this case?
- How will this experience change the way you care for clients in the future?
- Describe what you learned and how you will learn from this experience.

I would like to have the emergency room notes because I would be able to review the patient's full chart and understand the reason for her visit. While I might assume she came in for abdominal pain, it's crucial not to make assumptions. Reviewing their notes allows me to check the labs they performed, track her blood work levels, and determine if anything needs to be rechecked. One thing I've learned is that having all the proper information helps provide the highest level of care. Additionally, knowing all the medications the patient is on is essential to avoid drug complications. This experience has taught me the importance of gathering all the appropriate information before caring for patients. Always conduct a chart review, and when introducing yourself to the patient, gather some basic information to build trust.

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