

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>Level of motivation for learning:</p> <p>Mr.PFD is a 77 year old male admitted for suspected infectious endocarditis with aortic valve vegetation seen on TTE. with a secondary diagnosis of left-sided pyelonephritis without abscess. He is eager to prevent any other infections and wants to be able to know how to do dressing changes</p> <p>Barriers to effective learning:</p> <p>At the time of teaching there were no barriers to affect learning. PT had turned off the TV and had set his phone down.</p>	<p>Nursing Diagnosis:</p> <p>Risk for infection related to the central line as evidenced by suspected infectious endocarditis</p> <p>Goal of Teaching:</p> <p>Pt should be able to avoid infection spreading as well for taking care of PICC care if discharged to home. Pt able to do dressing changes without irritating the skin or messing with the placement of the PICC line.</p>	<p>Intervention 1:</p> <p>Wash your hands and use an aseptic technique for nursing tasks involving non-intact skin or invasive lines (Phelps, 2023).</p> <p>Intervention 2:</p> <p>Teach patients signs and symptoms of infection and when to contact a healthcare provider (Phelps, 2023).</p> <p>Intervention 3:</p> <p>Assess pulses in the cast above and below the extremity, edema,</p>	<p>Method 1: Discussion</p> <p>The client was informed of the official diagnosis and was provided information on the possibility of infection from PICC insertion. Also, information on the prevention of complications of phlebitis and thrombosis</p> <p>Method 2: Handout</p> <p>The client was given a handout covering the risks of PICC insertion, how to care for PICC, the disposal of supplies, and when to get help if complications arise.</p>	<p>Discuss how the client/family received the teaching:</p> <p>The patient received the teaching without hesitation and was open to learning, not being taught before insertion. The client relayed any concerns, which were addressed with research</p> <p>Identify strengths/weaknesses of the client or family in receiving teaching:</p> <p>Strengths were that the patient was able to understand teaching and was receptive to the care needed to prevent any complications regarding the PICC line. Also, the pt wanted to learn since could be a long-term placement of the PICC line to fight</p>

<p>Health beliefs/values:</p> <p>The client has not outlined or stated any health beliefs that could minimize teaching effectiveness. Also, the client wanted information on their PICC line, as care to apply a dressing and avoid infection.</p> <p>Psychosocial development:</p> <p>Industry vs. Inferiority</p> <p>Cognitive development:</p> <p>Formal operation (Hinkle et al., 2022). the patient lives at home alone and is retired</p>		<p>coolness, inability to move digits, paleness or cyanosis, and numbness of areas distal to the cast or PICC (Phelps, 2023).</p>		<p>against endocarditis.</p> <p>Suggest modifications to improve teaching plan (what would have improved the plan?):</p> <p>Modifications that could be included in the teaching could be interactive methods. As shown how to properly clean the site and apply a new dressing, to not irritate the site or accidentally move the placement of the PICC line. After insertion, an X-ray is done to confirm placement.</p>
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References (2) (APA):

Hinkle, J. L., Overbaugh, K. J., & Cheever, K. H. (2022). Brunner and Suddarth's textbook of medical-surgical nursing. Wolters Kluwer.

Phelps, L. L. (2023). Nursing diagnosis reference manual. Wolters Kluwer.