

**N311 Care Plan #**

**Lakeview College of Nursing**

**Name**

**Demographics (5 points)**

<b>Date of Admission</b> May 2018	<b>Patient Initials</b> E.J.B	<b>Age</b> 89	<b>Gender</b> F
<b>Race/Ethnicity</b> Caucasian	<b>Occupation</b> Retired Technician	<b>Marital Status</b> Single	<b>Allergies</b> Lisinopril
<b>Code Status</b> Full Code	<b>Height</b> 5'2	<b>Weight</b> 150	

**Medical History (5 Points)**

**Past Medical History: Blood Clots, Hypertension, Low Potassium, Atrial Filbration**

**Past Surgical History: Left Hip, Left Shoulder, Thyroid Surgery, Bilateral Knee Replacement, Cataracts, Appendix, Sea Section, Right Leg Surgery, Lumpectomy, Hernia**

**Family History: Mother (Deceased)- Hypertension, Alzheimers    Father (Deceased)- Blood Clot in Lungs**

**Social History (tobacco/alcohol/drugs): Patient states she does not use tobacco, alcohol, or drugs.**

**Admission Assessment**

**Chief Complaint (2 points): Left Leg Pain**

**History of present Illness (10 points): Patient complains of left leg pain in which she suffered a fall in May of 2018. She describes her pain as sharp intermitient pain. She states that walking makes her pain worse and to relieve her pain she uses Aspercreme. She states she had surgery on her leg right after her fall she sustained. She states her pain is at 0 at this time.**

**Primary Diagnosis**

**Primary Diagnosis on Admission (3 points):.**

**Secondary Diagnosis (if applicable):.**

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

**Pathophysiology References (2) (APA):**

**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			2.9	
Hgb			8.4	
Hct			34	
Platelets				
WBC			13.3	
Neutrophils				
Lymphocytes				
Monocytes				
Eosinophils				
Bands				

**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-			141	
K+			3.0	
Cl-			104	
CO2				

<b>Glucose</b>			<b>120</b>	
<b>BUN</b>			<b>17</b>	
<b>Creatinine</b>			<b>0.9</b>	
<b>Albumin</b>			<b>5.8</b>	
<b>Calcium</b>			<b>9.0</b>	
<b>Mag</b>				
<b>Phosphate</b>				
<b>Bilirubin</b>				
<b>Alk Phos</b>				

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

<b>Lab Test</b>	<b>Normal Range</b>	<b>Value on Admission</b>	<b>Today's Value</b>	<b>Reason for Abnormal</b>
<b>Color &amp; Clarity</b>				
<b>pH</b>				
<b>Specific Gravity</b>				
<b>Glucose</b>				
<b>Protein</b>				
<b>Ketones</b>				
<b>WBC</b>				
<b>RBC</b>				
<b>Leukoesterase</b>				

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				
Blood Culture				
Sputum Culture				
Stool Culture				

Lab Correlations Reference (APA):

Diagnostic Imaging

All Other Diagnostic Tests (10 points):

**Current Medications (10 points, 2 points per completed med)  
\*5 different medications must be completed\***

**Medications (5 required)**

<b>Brand/Generic</b>	<b>Losartan</b>	<b>Ergocalciferol</b>	<b>Diltiazem</b>	<b>Calcium acetate</b>	<b>Metoprolol Succinate</b>
<b>Dose</b>	<b>50 mg</b>	<b>200 IU</b>	<b>30 mg</b>	<b>338 mg</b>	<b>100 mg</b>
<b>Frequency</b>	<b>1 tab daily</b>	<b>Daily</b>	<b>3 times daily</b>	<b>3 tabs 3 times daily</b>	<b>1 tab daily</b>
<b>Route</b>	<b>Oral</b>	<b>Oral</b>	<b>Oral</b>	<b>Oral</b>	<b>Oral</b>
<b>Classification</b>	<b>Angiotensin II receptor antagonist</b>	<b>Vitamin D Supplements</b>	<b>Benzothiazepine derivative</b>	<b>Elemental Cation</b>	<b>Beta1-adrenergic antagonist</b>
<b>Mechanism of Action</b>	<b>Blocks binding of Angiotensin II to receptor sites</b>	<b>Calcium is absorbed through formation of a calcium-binding protein</b>	<b>Inhibits Calcium movement into coronary and vascular smooth-muscle cells</b>	<b>Increases levels of intracellular and extracellular calcium</b>	<b>Inhibits stimulation of beta1-receptor sites</b>
<b>Reason Client Taking</b>	<b>To reduce Blood Pressure</b>	<b>Vitamin D deficiency</b>	<b>To treat angina and to improve exercise tolerance</b>	<b>To treat hyperphosphatemia</b>	<b>To manage Hypertension</b>
<b>Contraindications (2)</b>	<b>1. Concurrent Aliskiren Therapy 2. Hypersensitivity to losartan</b>	<b>1. Hypercalcemia 2. Renal Failure</b>	<b>1. Acute MI 2. Cardiogenic shock</b>	<b>1. Hypercalcemia 2. Renal calculi</b>	<b>1. Acute heart failure 2. Cardiogenic shock</b>
<b>Side Effects/Adverse Reactions (2)</b>	<b>1. Dizziness 2. Hypotension</b>	<b>1. Hypervitaminosis D 2. Constipation</b>	<b>1. Syncope 2. Heart failure</b>	<b>1. Hypotension 2. Irregular Heart Beat</b>	<b>1. Chest pain 2. Heart failure</b>

**Medications Reference (APA):**

Pdr.net. (2019). *Drisdol (ergocalciferol) dose, indications, adverse effects, interactions...* from PDR.net. [online] Available at: <https://www.pdr.net/drug-summary/Drisdol-ergocalciferol-1904> [Accessed 22 Sep. 2019].

**Assessment**

**Physical Exam (18 points)**

<p><b>GENERAL:</b>  <b>Alertness:</b>  <b>Orientation:</b>  <b>Distress:</b>  <b>Overall appearance:</b></p>	<p><b>Very Alert</b>  <b>Alert and Orient x 4</b>  <b>Not anxious</b>  <b>Patient looks good and healthy</b></p>
<p><b>INTEGUMENTARY:</b>  <b>Skin color:</b>  <b>Character:</b>  <b>Temperature:</b>  <b>Turgor:</b>  <b>Rashes:</b>  <b>Bruises:</b>  <b>Wounds:</b>  <b>Braden Score:</b>  <b>Drains present: Y <input type="checkbox"/> N <input type="checkbox"/></b>  <b>Type:</b></p>	<p><b>Normal</b>  <b>Loose, intact, and elastic</b>  <b>Nose was cold, other parts of the body warm</b>  <b>Skin returns after being pulled</b>  <b>No rashes</b>  <b>Bruise on top of R. Hand</b>  <b>No wounds</b>  <b>Scored a 19- No apparent risk</b>  <b>No Drains</b></p>
<p><b>HEENT:</b>  <b>Head/Neck:</b>  <b>Ears:</b>  <b>Eyes:</b>    <b>Nose:</b>  <b>Teeth:</b></p>	<p><b>Normocephalic, no rashes, no lesions</b>  <b>Intact</b>  <b>Pupils were equal, round, react to light, and accommodate each other</b>  <b>Intact and no drainage</b>  <b>Has Dentures</b></p>
<p><b>CARDIOVASCULAR:</b>  <b>Heart sounds:</b>  <b>S1, S2, S3, S4, murmur etc.</b>  <b>Cardiac rhythm (if applicable):</b>  <b>Peripheral Pulses:</b></p>	<p><b>Normal sounds</b>  <b>Normal sounds and no murmurs</b>  <b>Regular rhythm</b>  <b>Radial Pulse- +3 Pedal Pulse- +1</b></p>

<p><b>Capillary refill:</b>  <b>Neck Vein Distention:</b> Y <input type="checkbox"/> N <input type="checkbox"/> <b>Edema</b>  Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Location of Edema:</b></p>	<p><b>Less than 3 seconds</b>  <b>No</b>  <b>Yes</b>  <b>Right Hand</b></p>
<p><b>RESPIRATORY:</b>  <b>Accessory muscle use:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Breath Sounds:</b> Location, character</p>	<p><b>No</b>  <b>Clear Lung sounds through all lobes</b></p>
<p><b>GASTROINTESTINAL:</b>  <b>Diet at home:</b>  <b>Current Diet</b>  <b>Height:</b>  <b>Weight:</b>  <b>Auscultation Bowel sounds:</b>   <b>Last BM:</b>  <b>Palpation: Pain, Mass etc.:</b>  <b>Inspection:</b>  <b>Distention:</b>  <b>Incisions:</b>   <b>Scars:</b>   <b>Drains:</b>  <b>Wounds:</b>  <b>Ostomy:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Nasogastric:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Size:</b>  <b>Feeding tubes/PEG tube</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Type:</b></p>	<p><b>Regular</b>  <b>Varies</b>  <b>5'2</b>  <b>150</b>  <b>Yes, hyperactive bowel sounds L. upper quadrant</b>  <b>This Morning</b>  <b>Pain in L and R upper quadrant</b>   <b>Lightly distended</b>  <b>Yes, from her sea section and appendix surgery</b>  <b>Yes, from her sea section and appendix surgery</b>  <b>No</b>  <b>No</b>  <b>No</b>  <b>No</b></p>
<p><b>GENITOURINARY:</b>  <b>Color:</b>  <b>Character:</b>  <b>Quantity of urine:</b>  <b>Pain with urination:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Dialysis:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Inspection of genitals:</b>  <b>Catheter:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Type:</b>  <b>Size:</b></p>	<p><b>Client states color looked normal</b>  <b>Normal</b>   <b>Yes</b>  <b>No</b>   <b>No</b></p>
<p><b>MUSCULOSKELETAL:</b>  <b>Neurovascular status:</b>  <b>ROM:</b>  <b>Supportive devices:</b>  <b>Strength:</b>  <b>ADL Assistance:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Fall Risk:</b> Y <input type="checkbox"/> N <input type="checkbox"/>  <b>Fall Score:</b></p>	<p><b>Has a pulse in each extremity</b>  <b>Full Range of motion in each extremity</b>  <b>Walker</b>  <b>Strong</b>  <b>No</b>  <b>Yes</b>  <b>Patient scored a 50 and is low risk for falls</b></p>

<b>Activity/Mobility Status:</b> <b>Independent (up ad lib)</b> <input type="checkbox"/> <b>Needs assistance with equipment</b> <input type="checkbox"/> <b>Needs support to stand and walk</b> <input type="checkbox"/>	<b>Patient gets up her own with the use of her walker</b> <b>Patient is independent</b> <b>No assistance needed</b> <b>Gets up by herself</b>
<b>NEUROLOGICAL:</b> <b>MAEW:</b> Y <input type="checkbox"/> N <input type="checkbox"/> <b>PERLA:</b> Y <input type="checkbox"/> N <input type="checkbox"/> <b>Strength Equal:</b> Y <input type="checkbox"/> N <input type="checkbox"/> if no - <b>Legs</b> <input type="checkbox"/> <b>Arms</b> <input type="checkbox"/> <b>Both</b> <input type="checkbox"/> <b>Orientation:</b> <b>Mental Status:</b> <b>Speech:</b> <b>Sensory:</b> <b>LOC:</b>	<b>Yes, able to move extremities well</b> <b>Yes</b> <b>Yes strength is equal</b>  <b>Alert and orient x4</b> <b>Normal</b> <b>Very clear and understood</b> <b>Able to feel well</b> <b>Very responsive</b>
<b>PSYCHOSOCIAL/CULTURAL:</b> <b>Coping method(s):</b> <b>Developmental level:</b> <b>Religion &amp; what it means to pt.:</b> <b>Personal/Family Data (Think about home environment, family structure, and available family support):</b>	<b>Patient copes with stress by taking medication</b> <b>Very well developed</b> <b>Catholic</b> <b>Patient states she has really good family support</b>

**Vital Signs, 1 set (5 points)**

Time	Pulse	B/P	Resp Rate	Temp	Oxygen
11:45	62 (R. Radial)	136/60 (R. Arm)	16	36.9°C	98%

**Pain Assessment, 1 set (5 points)**

Time	Scale	Location	Severity	Characteristics	Interventions
11:00	0-10	Left Leg	0	Sharp Pains	Aspracreme

**Intake and Output (2 points)**

<b>Intake (in mL)</b>	<b>Output (in mL)</b>
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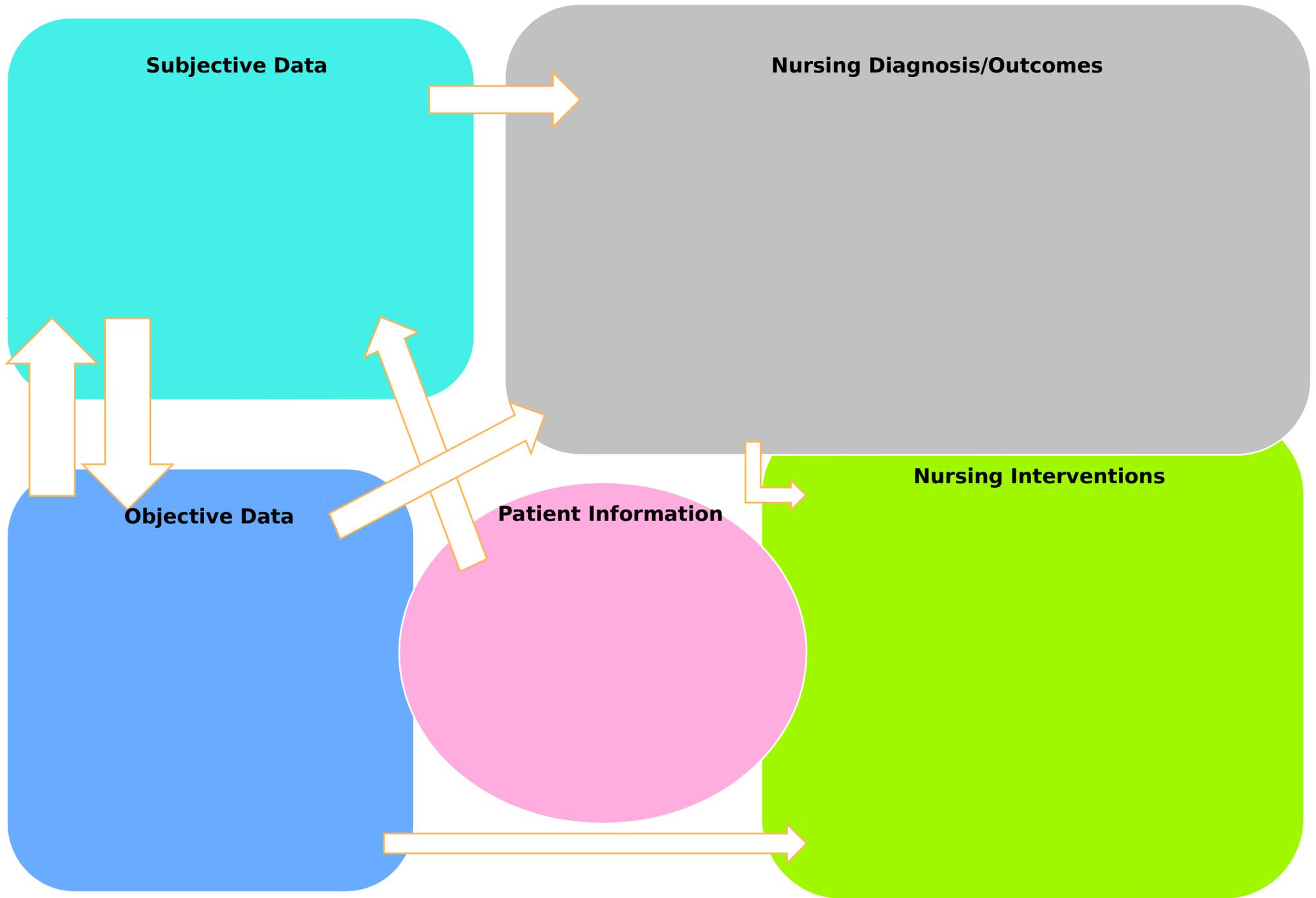
N/A	N/A
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**Nursing Diagnosis (15 points)**  
**\*Must be NANDA approved nursing diagnosis\***

<b>Nursing Diagnosis</b> <ul style="list-style-type: none"> <li>• Include full nursing diagnosis with “related to” and “as evidenced by” components</li> </ul>	<b>Rational</b> <ul style="list-style-type: none"> <li>• Explain why the nursing diagnosis was chosen</li> </ul>	<b>Intervention (2 per dx)</b>	<b>Evaluation</b> <ul style="list-style-type: none"> <li>• How did the patient/family respond to the nurse’s actions?</li> <li>• Client response, status of goals and outcomes, modifications to plan.</li> </ul>
1.		1. 2.	
2.		1. 2.	

**Other References (APA):**

**Concept Map (20 Points):**



**Subjective Data**

**Nursing Diagnosis/Outcomes**

**Objective Data**

**Patient Information**

**Nursing Interventions**



