

N311 Care Plan #2

Lakeview College of Nursing

Savannah Woods

Demographics

Date of Admission	Patient Initials	Age	Gender
9-25-19	M.L.	87	Female
Race/Ethnicity	Occupation	Marital Status	Allergies
White	Unemployed-retired	Widow	No Known Allergies
Code Status	Height	Weight	
Full Code	5'2	121 lbs.	

Medical History

Past Medical History: Dementia, acute cystitis with hematuria, late effect of closed pelvic fracture, anxiety disorder

Past Surgical History: hip surgery to correct hip fracture

Family History: unknown

Social History (tobacco/alcohol/drugs): Former smoker

Admission Assessment

Chief Complaint: hip pain, with slight wrist pain (client now rates level of pain at a 2 as she is in recovery, pain scale is 0-10, 10 being the worst)

History of present Illness: patient fell and fractured pelvis, landed on wrist no other information was given

Primary Diagnosis

Primary Diagnosis on Admission: Pelvic ring fracture closed, fall initial encounter

Secondary Diagnosis (if applicable): none

Pathophysiology of the Disease, APA format: Hip fracture, in pathology, a break in the proximal end of the femur. Hip Fracture can occur at any age. Common causes include

severe impact. The risk of hip fracture from falls and bone loss increases with age. Persons over age 65 may be unsteady on their feet, and their balance can be affected by medications, dementia, and frailty. Aging is also often associated with bone loss, particularly in women. Persons whose bones are weak may suffer a hip fracture when attempting to support their weight on one leg or when moving the hips in a twisting motion. Client was more prone to the fracture most likely due to her age. With her age she has much weaker bones and less coordination, as well as her dementia could have thrown her off balance. Client was also a former smoker which likely had an impact in the weakening of her bones as well.

Pathophysiology References (2) (APA): Anderson, J. (n.d.). Hip fracture. Retrieved from <https://www.britannica.com/science/hip-fracture>.

Hip fracture. (2018, May 11). Retrieved from <https://www.mayoclinic.org/diseases-conditions/hip-fracture/symptoms-causes/syc-2037346>
8.

Laboratory Data

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	No CBC blood work was done for this client			
Hgb	-			
Hct	-			
Platelets	-			
WBC	-			
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-	136-145 mmol/L	139		
K+	3.5-5.1 mmol/L	3.6		
Cl-				
CO2				
Glucose				

BUN	7-18 mg/dL	14		
Creatinine	0.55-1.02 mg/dL	0.93		
Albumin	No albumin testing done			
Calcium	8.5-10.1 mg/dL	8.6		
Mag	1.6-2.6 mg/dL	2.2		
Phosphate				
Bilirubin				
Alk Phos				

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

Lab Test	Normal Range	Value on Admission	Today's Value	Reason for Abnormal
Color & Clarity	Colorless-yellow	Amber, hazy		Abnormal, infection
pH	5.0-7.0	5.0		
Specific Gravity	1.0003-1.035 arbitrary unit	1.011		
Glucose	Negative	Negative		

Protein	Negative	Negative		
Ketones	Negative	Negative		
WBC	0-25/uL	111		High, indicates infection present
RBC	0-20/uL	39		High, infection present
Leukoesterase	Negative	Small!		Abnormal, infection

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	No growth	Mixed growth of urogenital flora		suggestive of improper collection technique
Blood Culture	None			
Sputum Culture	None			
Stool Culture	None			

Lab Correlations Reference (APA): Urinalysis. (n.d.). Retrieved from <https://labtestsonline.org/tests/urinalysis>.

Diagnostic Imaging

All Other Diagnostic Tests:

XR Wrist Left Complete- Normal alignment. No visible fractures. Limited evaluation of the scaphoid. No radio opaque foreign objects. There is chondrocalcinosis in the wrist. Minimal widening of the scapholunate interval. Reactive sclerosis between the lunate and capitate. Advanced degenerative changes between the trapezium and the first metacarpal.

Current Medications

5 different medications must be completed

Medications

Brand/Gener ic	Donepezil (Aricept)	Hydrocodo ne-acetami nophen (Norco)	Myrbetriq (mirabegro n)	Zoloft (Sertraline)	Ocean Nasal (Sodium Chloride)
Dose	10 mg	1 tablet	50 mg	50 mg	0.65%
Frequency	10 mg Daily at bedtime	Every 4-6 hours as needed	1 tablet everyday	1 tablet Everyday	1 spray everyday as needed
Route	Mouth	Mouth	Mouth	Mouth	Each nostril

Classification	Chemical: piperidine derivative Therapeutic: antidementia	Chemical: nonsalicylate, para-amino phenol derivative Therapeutic: c: antipyretic, nonopioid analgesic Chemical (20): semisynthetic opioid agonist Therapeutic c (2): analgesic	Chemical: beta-3 adrenergic agonist Therapeutic : bladder relaxant	Chemical: naphthylamine derivative Therapeutic: antianxiety, antidepressant, antiobsessant , antipanic, antiposttraumatic stress, antipremenstrual dysphoric	Decongestants, intranasal
-----------------------	-------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------

<p>Mechanism of Action</p>	<p>Reversibly inhibits acetylcholinesterase and improves acetylcholine's concentration at cholinergic synapses.</p>	<p>Inhibits the enzyme cyclooxygenase, blocking prostaglandin production and interfering with pain impulse generation in the peripheral nervous system. Binds to and activates opioid receptors at sites in the periaqueductal</p>	<p>Relaxes the detrusor smooth muscle during the storage phase of the urinary bladder fill-void cycle by activating the beta-3 adrenergic receptor, which increases bladder capacity.</p>	<p>Inhibits reuptake of the neurotransmitter serotonin by CNS neurons, thereby increasing the amount of serotonin available in nerve synapses.</p>	<p>Relieves nasal congestion by thinning mucus and moisturizes membranes, helps reduce nasal swelling</p>
-----------------------------------	---------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

Reason Client Taking	Slow down progression of client dementia	To decrease client's pain in hip	Used to help reduce clients urge incontinenc e	Reduce stress dude to anxiety disorder	To clear up client's congestion
Contraindica tions (2)	Hypersensitivi ty to donepezil, piperidine derivatives, or their components	Not to people with hypersensit ivity to hydrocodon e or acetaminop hen	Hypersensit ivity to mirabegron or its components	Concurrent use of disulfiram or pimozide, hypersensitiv ity to sertraline or its components	None
Side Effects/Adve rse Reactions (2)	Abnormal gait, agitation, aggression	Nausea, vomiting, constipatio n	Anxiety, confusion, fatigue	Abnormal dreams, aggressivenes s, confusion	None

Medications Reference (APA): Jones & Bartlett Learning. (2019). 2019 Nurses drug handbook. Burlington, MA.

Ocean, Ayr Saline (sodium chloride, intranasal) dosing, indications, interactions, adverse effects, and more. (2019, September 28). Retrieved from

<https://reference.medscape.com/drug/ocean-ayr-saline-sodium-chloride-intranasal-999833>.

Assessment

Physical Exam (18 points)

GENERAL: Alertness: Orientation: Distress: Overall appearance:	X3, alert come mild confusion, communicated verbally, speech was clear, able to understand what I was saying, well-kept appearances, did not appear in any distress
INTEGUMENTARY: Skin color: Character: Temperature: Turgor: Rashes: Bruises: Wounds: . Braden Score: Drains present: Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Type:	Skin was warm and dry, turgor normal, no visible rashes, bruises, wounds, skin color pale pink
HEENT: Head/Neck: Ears: Eyes: Nose:	Patient uses glasses for impaired eyes as well as hearing aids, teeth looked well kept

Teeth:	
CARDIOVASCULAR: Heart sounds: S1, S2, S3, S4, murmur etc. Cardiac rhythm (if applicable): Peripheral Pulses: Capillary refill: Neck Vein Distention: Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Edema Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Location of Edema:	Capillary refill < 3 sec
RESPIRATORY: Accessory muscle use: Y <input type="checkbox"/> N <input type="checkbox"/> Breath Sounds: Location, character	Lungs clear bilaterally, no coughing or difficult breathing
GASTROINTESTINAL: Diet at home: Current Diet Height: Weight: Auscultation Bowel sounds: Last BM: Palpation: Pain, Mass etc.:	Normal diet, bowel sounds present x4, not tender, no indigestion, no nausea or vomiting, no diarrhea or constipation

<p>Inspection:</p> <p>Distention:</p> <p>Incisions:</p> <p>Scars:</p> <p>Drains:</p> <p>Wounds:</p> <p>Ostomy: Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>Nasogastric: Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>Size:</p> <p>Feeding tubes/PEG tube Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>Type:</p>	
<p>GENITOURINARY:</p> <p>Color:</p> <p>Character:</p> <p>Quantity of urine:</p> <p>Pain with urination: Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>Dialysis: Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>Inspection of genitals:</p> <p>Catheter: Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>Type:</p> <p>Size:</p>	<p>No urine complaints, clear yellow</p>
<p>MUSCULOSKELETAL:</p> <p>Neurovascular status:</p>	<p>Obeys commands, denies any weakness, tremors, numbness or tingling, uses walker,</p>

<p>ROM:</p> <p>Supportive devices:</p> <p>Strength:</p> <p>ADL Assistance: Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Fall Risk: Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Fall Score:</p> <p>Activity/Mobility Status:</p> <p>Independent (up ad lib) <input type="checkbox"/></p> <p>Needs assistance with equipment <input type="checkbox"/></p> <p>Needs support to stand and walk <input type="checkbox"/></p>	<p>steady gait, able to move all extremities, self-positioning</p>
<p>NEUROLOGICAL:</p> <p>MAEW: Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>PERLA: Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Strength Equal: Y <input type="checkbox"/> N <input type="checkbox"/> if no -</p> <p>Legs <input type="checkbox"/> Arms <input type="checkbox"/> Both <input type="checkbox"/></p> <p>Orientation:</p> <p>Mental Status:</p> <p>Speech:</p> <p>Sensory:</p> <p>LOC:</p>	<p>Arms equally strong, right leg stronger than left side due to fractured left sided pelvis, client speaks well and has slight confusion as times</p>
<p>PSYCHOSOCIAL/CULTURAL:</p> <p>Coping method(s):</p> <p>Developmental level:</p>	<p>.</p>

Religion & what it means to pt.: Personal/Family Data (Think about home environment, family structure, and available family support):	
----------------------------------------------------------------------------------------------------------------------------------------------------------------	--

Vital Signs, 1 set

Time	Pulse	B/P	Resp Rate	Temp	Oxygen
10:3	76	138/79	18	97.4 oral/F	96%

Pain Assessment, 1 set

Time	Scale	Location	Severity	Characteristics	Interventions
0900	0-10	Left sided hip	2	Sore	

Intake and Output

Intake (in mL)	Output (in mL)
unknown	

Nursing Diagnosis

Must be NANDA approved nursing diagnosis

Nursing Diagnosis	Rational	Intervention (2	Evaluation
--------------------------	-----------------	------------------------	-------------------

<ul style="list-style-type: none"> • Include full nursing diagnosis with “related to” and “as evidenced by” components 	<ul style="list-style-type: none"> • Explain why the nursing diagnosis was chosen 	<p>per dx)</p>	<ul style="list-style-type: none"> • How did the patient/family respond to the nurse’s actions? • Client response, status of goals and outcomes, modifications to plan.
<p>1. Impaired physical mobility related to musculoskeletal and unfamiliarity with use of immobilization devices, due to fractured hip from a fall.</p>	<p>Client must use wheelchair or walker due to her fractured hip with surgery and recovering</p>	<p>1.rehab and/or medical therapy with intent of returning home</p> <p>2.Provide help with everyday activities that client is limited on due to recovery</p>	<p>Client is looking forward to being able to return home, she is cooperative with the plans. Vital signs good and recovery well.</p>
<p>2. Constipation related to decreased mobility and use of opioid analgesics, due</p>	<p>Client is on pain medications after initial fracture and surgery</p>	<p>1. increased patient foods to have more fiber and fluids</p> <p>2.slowly increase</p>	<p>Client is on a regular diet is fine with adding fiber and increasing exercise, is looking forward to being able to do it herself again, in</p>

to injured hip and pain medications.		client physical exercise as she heals	time.
-----------------------------------------------------	--	------------------------------------------------------	--------------

Other References (APA): Swearingen, P. L. (2016). *All-in-one nursing care planning resource: medical-surgical, pediatric, maternity, and psychiatric-mental health*. St. Louis, MO: Elsevier.

Concept Map (20 Points):

Subjective Data

Client is slight pain due to fracture and healing process; urinalysis indicates urinary infection by high WBC and RBC, client has anxiety disorder and dementia, acute cystitis with hematuria, vital signs good

Nursing Diagnosis/Outcomes

Impaired physical mobility related to musculoskeletal and unfamiliarity with use of immobilization devices
Constipation related to decreased mobility and use of opioid analgesics

Client must use wheelchair or walker due to her fractured hip with surgery and recovering, client is on pain medications after initial fracture and surgery

Objective Data

X3, alert come mild confusion, communicated verbally, speech was clear, able to understand what I was saying, well-kept appearances, did not appear in any distress
Skin was warm and dry, turgor normal, no visible rashes, bruises, wounds, skin color pale pink
Patient uses glasses for impaired eyes as well as hearing aids
Capillary refill < 3 sec
Lungs clear bilaterally, no coughing or difficult breathing
Normal diet, bowel sounds present x4, not tender, no indigestion, no nausea or vomiting, no diarrhea or constipation
Right leg stronger than left due to fracture
TimePulseB/PResp Rate Temp
10:376138/7918 97.4 oral/F
Oxygen 96%

Patient Information

9-25-19
M.L.
Age: 87 Gender:
Female
Race/Ethnicity: White
Occupation:
Unemployed-retired
Marital Status: Widowed
WidowAllergies
No Known Allergies
Code Status
Full CodeHeight
5'2Weight

Nursing Interventions

rehab and/or medical therapy with intent of returning home
Provide help with everyday activities that client is limited on due to recovery
increased patient foods to have more fiber and fluids
slowly increase client physical exercise as she heals

