

N311 Care Plan #

Lakeview College of Nursing

Name

Demographics (5 points)

Date of Admission 09/24/2019	Patient Initials H.H	Age 93	Gender Male
Race/Ethnicity White	Occupation Full Time	Marital Status Married	Allergies Reglan
Code Status Full Code	Height	Weight	

Medical History (5 Points)

Past Medical History: History of Colon Diverticulitis, Elevated Troponin,

Hypomagnesemia, Hypomagnesmia, Hypoatremia, Pneumoperitoneum, Diverticulitis of the Large Intestine with Perforation without perforation, HTN (Hypertension), Congestive Heart Failure, Colostomy in Place

Past Surgical History: Colostomy, Colostomy closure Procedure

Family History: Heart attack

Social History (tobacco/alcohol/drugs): Alcohol use not currently

Admission Assessment

Chief Complaint (2 points):

History of present Illness (10 points):

Primary Diagnosis

Primary Diagnosis on Admission (3 points): Colostomy in Place

Secondary Diagnosis (if applicable):

Pathophysiology of the Disease, APA format (20 points): A colostomy is a surgical procedure that brings one end of the large intestine out through the abdominal wall.

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During this procedure, one end of the colon is diverted through an incision in the abdominal wall to create a stoma. A stoma is the opening in the skin where a pouch for collecting feces is attached. People with temporary or long-term colostomies have pouches attached to their sides where feces collect and can be easily disposed of.

Why a Colostomy Is Performed;

Colostomies are performed because of problems with the lower bowel. Some problems can be corrected by temporarily diverting stool away from the bowel. This is when temporary colostomies are used to keep stool out of the colon. Conditions in which you may need a permanent colostomy include:

- **a blockage**
- **an injury**
- **Crohn's disease, which is an autoimmune form of inflammatory bowel disease**
- **colorectal cancer**
- **colonic polyps, which is extra tissue growing inside the colon that may be cancer or may turn into cancer**
- **diverticulitis, which occurs when small pouches in your digestive system, called diverticula, become infected or inflamed**
- **imperforate anus or other birth defects**
- **irritable bowel syndrome, which is a condition affecting the colon that causes diarrhea, bloating, constipation, and pain in the abdominal area**
- **ulcerative colitis, which is an inflammatory bowel disease that causes the long-term inflammation of the digestive tract**

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ostomy is done while you are under general anesthesia (asleep and pain-free). It may be done either with a large surgical cut in the abdomen or with a small camera and several small cuts (laparoscopy).

The type of approach used depends on what other procedure needs to be done. The surgical cut is usually made in the middle of the abdomen. The bowel resection or repair is done as needed.

For the colostomy, one end of the healthy colon is brought out through an opening made in the abdomen wall, usually on the left side. The edges of bowel are stitched to the skin of opening. This opening is called a stoma. A bag called a stoma appliance is placed around the opening to allow stool to drain.

Your colostomy may be short-term. If you have surgery on part of your large intestine, a colostomy allows the other part of your intestine to rest while you recover. Once your body has fully recovered from the first surgery, you will have another surgery to reattach the ends of the large intestine. This is usually done after 12 weeks.

Pathophysiology References (2) (APA):Colostomy: Medlineplus Medical Encyclopedia

<https://medlineplus.gov/ency/article/002942.html>

Living With a Colostomy: Types, Uses, Care, and More

<https://www.webmd.com/colorectal-cancer/guide/living-colostomy>

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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	4.40 - 5.80	3.80	3.80	
Hgb	13.0 - 16.5	11.5	11.5	
Hct	38.0 - 50.0	33.5	33.5	
Platelets	140 - 440	216	216	
WBC	4.0 - 12.0	4.70	4.70	
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-	133 - 144	128	128	
K+	3.5 - 5.1	3.8	3.8	
Cl-		94	94	
CO2				
Glucose		152	152	

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BUN	7 - 25mg	5	5	
Creatinine	0.50 - 1.20	0.59	0.59	
Albumin				
Calcium	8.60 - 10.3	8.3	8.3	
Mag				
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				
pH				
Specific Gravity				
Glucose				
Protein				
Ketones				
WBC				
RBC				
Leukoesterase				

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):

Imaging results; ABDOMEN 2 VIEWS (SUPINE WITH DECABITUS OR ERECT VIEWS)

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

Medications (5 required)

Brand/Generic	Aspirin	Magnesium	Melatonin	Meclizine	Spironolactine
Dose	81mg	1 Cap	25mg	12.5 mg	25mg
Frequency					
Route	Oral	Oral	Oral	Oral	Oral
Classification	NSAID's	Mineral Supplement	Melatonger nic	Antihistami nes	Pottasium Diuretics
Mechanism of Action	Anti inflammator y	Anticonvuls ant	Unknown	Antivertigo	Aldacy
Reason Client Taking	Blood Thinners	Blood Thinners	Sleep aid	Motion Sickness	Heart failure
Contraindications (2)	Coagulation Anemia	Renal Function	Irratability Stomach cramps	Asthma Bladder Obstruction	Heart failure NSAID's
Side Effects/Adverse Reactions (2)	Nausea Headache	Stomach upset Diarrhex	Depression Dizziness	Drowsiness Fatigue	low pottasium Leg cramps

Medications Reference (APA):

Aspirin Side Effects: Common, Severe, Long Term. (n.d.). Retrieved from

<https://www.drugs.com/sfx/aspirin-side-effects.htm>.

Magnesium Supplements: Benefits, Deficiency, Dosage, Effects, and More. (n.d.). Retrieved

from <https://www.webmd.com/diet/supplement-guide-magnesium#1>.

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Melatonin: Uses, Side Effects, Interactions, Dosage, and Warning. (n.d.). Retrieved from <https://www.webmd.com/vitamins/ai/ingredientmono-940/melatonin>.

Meclizine: Uses, Dosage & Side Effects. (n.d.). Retrieved from <https://www.drugs.com/meclizine.html>.

Spirolactone: Uses, Dosage, Side Effects. (n.d.). Retrieved from <https://www.drugs.com/spironolactone.html>.

Assessment

Physical Exam (18 points)

GENERAL: Alertness: X3 Orientation: yes Distress: None Overall appearance: Looks good	
INTEGUMENTARY: Skin color: good and moist Character: good Temperature: 97.5 Turgor: None Rashes: None Bruises: None Wounds: None Braden Score: Drains present: Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Type:	
HEENT: Head/Neck: Ears: Eyes: Nose: Teeth:	
CARDIOVASCULAR: Heart sounds: S1, S2, S3, S4, murmur etc. Cardiac rhythm (if applicable):	

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<p>Peripheral Pulses: Capillary refill: Neck Vein Distention: Y <input type="checkbox"/> N <input type="checkbox"/> Edema Y <input type="checkbox"/> N <input type="checkbox"/> Location of Edema:</p>	
<p>RESPIRATORY: Accessory muscle use: Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Breath Sounds: Location, character</p>	
<p>GASTROINTESTINAL: Diet at home: Regular Current Diet Height: Weight: Auscultation Bowel sounds: Last BM: Palpation: Pain, Mass etc.: Inspection: Distention: Incisions: Scars: Drains: Wounds: Ostomy: Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Nasogastric: Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Size: Feeding tubes/PEG tube Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Type:</p>	
<p>GENITOURINARY: Color: Character: Quantity of urine: Pain with urination: Y <input type="checkbox"/> N <input type="checkbox"/> Dialysis: Y <input type="checkbox"/> N <input type="checkbox"/> Inspection of genitals: Catheter: Y <input type="checkbox"/> N <input type="checkbox"/> Type: Size:</p>	
<p>MUSCULOSKELETAL: Neurovascular status: ROM: Supportive devices: Strength:</p>	

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ADL Assistance: Y <input type="checkbox"/> N <input type="checkbox"/> Fall Risk: Y <input type="checkbox"/> N <input type="checkbox"/> Fall Score: Activity/Mobility Status: Independent (up ad lib) <input type="checkbox"/> Needs assistance with equipment <input type="checkbox"/> Needs support to stand and walk <input type="checkbox"/>	
NEUROLOGICAL: MAEW: Y <input type="checkbox"/> N <input type="checkbox"/> PERLA: Y <input type="checkbox"/> N <input type="checkbox"/> Strength Equal: Y <input type="checkbox"/> N <input type="checkbox"/> if no - Legs <input type="checkbox"/> Arms <input type="checkbox"/> Both <input type="checkbox"/> Orientation: Mental Status: Speech: Sensory: LOC:	
PSYCHOSOCIAL/CULTURAL: Coping method(s): Developmental level: Religion & what it means to pt.: Personal/Family Data (Think about home environment, family structure, and available family support):	

Vital Signs, 1 set (5 points)

Time	Pulse	B/P	Resp Rate	Temp	Oxygen
8.05am	85	141/ 54	20	97.5	94

Pain Assessment, 1 set (5 points)

Time	Scale	Location	Severity	Characteristics	Interventions
8.05am	0	Room			

Intake and Output (2 points)

Intake (in mL)	Output (in mL)
636	

Nursing Diagnosis (15 points)***Must be NANDA approved nursing diagnosis***

Nursing Diagnosis <ul style="list-style-type: none"> ● Include full nursing diagnosis with “related to” and “as evidenced by” components 	Rational <ul style="list-style-type: none"> ● Explain why the nursing diagnosis was chosen 	Intervention (2 per dx)	Evaluation <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.
1. At risk for constipation		1. Establish a bladder routine before discharge 2. Teach patient to avoid caffeine and alcoholic beverages	
2. At risk for pain		1. Provide patient controlled analgesia(PCA) as prescribed 2. For opioids, monitor respiratory rate, sedation level and pain sensitivity	

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Other References (APA):

Concept Map (20 Points):



