

Subjective data

- Chief complaint of right-sided weakness + facial droop
- appears uncomfortable

Patient Information

O.B is a 60-year-old Caucasian male with a past medical history of hypertension, hypercholesterolemia, uncontrolled diabetes mellitus type II, and obesity (BMI 31.6). Past surgical history includes a colonoscopy in 2019. Patient has smoked 1 pack/day for 40 years. Known allergies include Sulfa.

Objective data

- Patient was not febrile during my shift
- CBC showed no abnormalities
- Blood glucose was elevated
- CT scan showed no acute bleeding
- Bedside swallow test was negative for any abnormalities

Nursing diagnosis + outcomes

- Impaired physical mobility
Outcome: Upon discharge, patient can demonstrate ambulation/transferring techniques. He also shows no sign of shoulder subluxation
- Unilateral neglect
Outcome: Nursing staff works to improve mild weakness as well as aid the patient when help is needed.

Nursing interventions

- teach methods of turning/moving
- Refer to PT and OT
- Arrange environment to the unaffected side
- Perform activities on unaffected side

- Deficient knowledge
Outcome: Patient can demonstrate knowledge of proper med. administration, symptoms/treatment for hyperglycemia + exercise needed to control dm type 2.
- Risk for injury
Outcome: Avoiding injury that can occur due to the neuromuscular deficits that occur with ischemic strokes

- teach s/s of hyperglycemia
- Educate on importance of following given diet

following given diet

- Remind pt. to scan environment
- give step-by-step directions + speak in short sentences