

**Nursing Dx 1:** Impaired gas exchange related to chronic respiratory failure as evidenced by a weakened diaphragm, secretions from the trachea, and the use of a trilogy vent.

**Expected Outcome:** By the end of the shift, the patient will be able to exhibit optimal respiratory function (RR 12-20).

**Interventions:**

- Position the patient in semi-fowlers
- Suction as necessary.
- Ensure the ventilator is at the correct settings per the provider's order
- Education on irritants that may impair gas exchange.

**Evaluation:** Goal met. By the end of the shift, the patient was able to exhibit optimal respiratory function (RR 12-20).

**Nursing Dx 2:** Impaired physical mobility related to weakness of the muscles as evidenced by generalized weakness, the need for total assistance, and the use of assisted devices such as a wheelchair.

**Expected Outcome:** Within 2 hours, the patient performs physical activity within the limits of the disease by using his phone.

**Interventions:**

- Ensure the environment is safe with bed rails up, the bed in a down position, and essential items close by.
- Turn and position the patient every 2 hours or as needed.
- Assist with transfer methods when transferring patients to bed, chair, or stretcher.
- Per the provider's order, administer the medications.

**Evaluation:**

- Goal met. Within 2 hours, the patient performed physical activity within the limits of the disease by using his phone.

**Past Medical History:** Muscular dystrophy, dysphagia, gastrostomy, neurogenic bladder, urinary retention, weakness in extremities, scoliosis, spina bifida of lumbar region without hydrocephalus, tethered cord, generalized anxiety disorder with panic attacks, normocytic anemia

**Past Surgical History:** Could not find in chart.

**Medical Diagnosis:** Chronic hypercapnic respiratory failure,

**Diagnostic tests and results:** Could not find in chart.

**Assessment:**

- No pain reported: 0/10
- A&O 4, VS: Temp 98°F, HR 70, SpO<sub>2</sub> 98, BP 106/53, RR 14
- Limited movement in fingers, motor strength +1
- Trach: Adult Shiley, 7.0, uncuffed (December 31, 2022)
- Vent: Trilogy vent, rate 12, 21%
- G tube: Mickey, 14 ft, 2.8 cm
- Puree diet, medication through tube
- Incontinent and is diapered
- Latex allergy

**Medications:**

- Acetaminophen 600 mg PRN pain
- Albuterol sulfate 2.5 mg IH TID
- Albuterol/Ipratropiumum 3mL IH Q3H
- Ferrous Sulfate 300 mg GT BID
- Fluticasone Propionate flovent 110 mcg
- Melatonin 3mg GT bedtime PRN insomnia
- Polyethylene Glycol 17gm GT daily PRN
- Sertraline HCL 50 mg GT daily
- Silver nitrate 1 each TP daily, PRN granuloma
- Terazosin HCL 5 mg GT bedtime

**Nursing Dx 3:** Risk for infection related to a site for organism invasion .

**Expected Outcome:** Within 4 hours, the patient will remain free of infection based on maintaining normal vital signs and the absence of signs and symptoms of infection.

**Interventions:**

- Wash hands/perform hand hygiene before interacting with the patient
- Use appropriate personal protective equipment (PPE) when interacting with the patient
- Ensure that any articles used are adequately disinfected or sterilized before using them
- Provide necessary care for the sites and tubes, such as GT and tracheal tubes.

**Evaluation:** Goal met. Within 4 hours, the patient remained free of infection based on maintaining normal vital signs and the absence of signs and symptoms of infection.

**Nursing Dx 4: Example:** Risk for aspiration related to gastrostomy tube feedings.

**Expected Outcome:** By the end of the shift, the patient is able to tolerate feedings and has clear lung sounds, unlabored breathing, and oxygen saturation within normal limits

**Interventions:**

- Keep suction equipment within reach
- Position the patient's head of bed elevated 30 to 40 degrees and maintained for 30 to 45 minutes after feeding.
- Perform suction as needed.
- Continue to emphasize and educate the need for proper positioning to the patient and family.

**Evaluation:** Goal met. By the end of the shift, the patient is able to tolerate feedings and has clear lung sounds, unlabored breathing, and oxygen saturation within normal limits.