

Journal entry #3 Narrative Notes

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8:00AM My patient Ms. MN was admitted to Lincoln Hospital for multiple diagnosis, dehydration, hematuria, and hyponatremia. The patient AHCD is full code, and when assessing the patient, her lung is clear and no abnormal sound. Her normal heart sound is S1 and S2 sound of the mitral and tricuspid valves closing while the second lub-dub is the sound of aortic and pulmonary valves closing respectively. MS. MN was provided high fiber diet and must increase fluid consumption to prevent impaction because a moist stool can pass through bowel easily. Her temperature is 98.2; pulse 83, pulse oximetry is 97 and her blood pressure is 149/86 which indicate that her blood is high. I report to the nurse in charge about Ms. MN blood pressure and she was given carvedilol and Imdur a blood pressure medication to decrease it. After given the patient the medication, her blood pressure was taken again by the nurse. Ms. MN had no NPO but has high-fiber diet and must increase fluid consumption to prevent impaction because a moist stool can pass through bowel easily. Patient must maintained soft formed bowel moment free of pain and straining and successfully able to identify action to take to prevent constipation in the future. Ms. MN was waiting to be discharge and while she was waiting, she was educated about the important of fluid and fiber diet. Patient will be able to go to the bathroom independently and no further skin breakdown as she has been discharge to go home.