

## Surgical Case 5: Lloyd Bennett

### Documentation Assignments

#### **1.Document your focused postoperative assessment for Lloyd Bennett.**

Patient AAOX3, able to make his needs known with no respiratory distress noted, lungs sound clear bilaterally, heart sounds, S1 and S2 normal, bowel movement normoactive, skin intact, wound shown no sign of infection , IV site intact, no infiltration noted, no redness, no bleeding and no drainage noted. V/S: BP110/71, P94, RR17, T99F, O2: 94% RA.

#### **2.Document Lloyd Bennett’s allergies in his chart.**

The patient had an acute transfusion reaction while receiving parked red blood cells.

#### **3.Document Lloyd Bennett’s vital signs during the transfusion reaction.**

Previous V/S: BP106/69, RR17, T99F, O2:94 RA, HR92

During transfusion V/S: BP 114/73, T99F, RR19, O2:94% HR97

#### **4.Document the priority nursing actions completed during the transfusion reaction.**

While the patient was showing sign allergic reactions to the blood, I stopped the transfusion immediately and assessed the patient further, called the provider, educated the patient about the transfusion reaction, followed the physician’s new orders. Obtained urine and blood sample sent to the labs contact blood bank, administered 0.9% normal saline at 100 ml/hr via IV, and reassessed the patient lungs and vital signs.

#### **5.Identify and document key nursing diagnoses for Lloyd Bennett.**

Risk for infection

Risk for injury.

Fluid volume excess

Anxiety

Impaired gas exchange

#### **6.Referring to your feedback log, document the nursing care you provided.**

I introduced self to patient, wash hands , check identification , sit the patient up for comfort, acting for any allergies , checked vital signs, assess lungs, bowel sounds, skin , IV , obtained consent from patient, checked the blood with another nurse, infused the blood at 100 ml /hr, patient got a reaction to the blood , and I stopped the blood , reassess the patient, called provider, contact the blood bank , followed new physician order , obtained urine and blood culture for complication , administered 0.9 % normal saline via IV while continuing monitoring the patient closely and educated patient on the reaction.