

Nursing Diagnosis: Risk for fall related to right leg weakness.

Expected Outcome: The patient will maintain stabilization and alignment of the fracture.

Interventions

1. Provide support for joints above and below the fracture site, especially when moving and turning.
2. Support the fracture site with pillows or folded blankets.
3. Maintain position in a leg brace.
4. Review restrictions imposed by therapy such as not bearing weight in the affected leg.

Evaluation: The patient was able to maintain stabilization and alignment during the 8-hour shift. Goal met.

Nursing Diagnosis: Deficient knowledge related to safety as evidenced by the patient getting out of bed without a nurse present.

Expected Outcome: The patient will verbalize safety measures that will decrease the risk of injury after 30 minutes of teaching

Interventions

1. Educate the patient to call for assistance when getting out of bed.
2. Keep the call bell within reach.
3. Educate the patient to always keep the bed at the lowest level.
4. Report any pain or swelling in the affected area.

Evaluation: Goal met. Patient was able to verbalize safety measures after 30-minute teaching.

Reason for seeking healthcare:

Dislocated left knee.

Medical Diagnosis/Surgical

Procedure: Compartment syndrome, fasciotomy, peroneal nerve injury, bypass graft, history of asthma

Assessment:

- A&O x4, Temp 96.1, BP 123/57, HR 73, RR 16.
- Medication PO
- PO
- regular diet
- require assistance to the bathroom with a wheelchair
- weakness on the right leg
- No allergies
- No pain
- can use a walker
- swelling on the left leg (cap refill <3secs)
- can use a walker

Medications:

- Acetaminophen 975 mg PO Q4H PRN
 - Aspirin 81mg daily
 - cholecalciferol 4000 units PO daily
 - Ferrous Sulfate 325mg PO BID
 - Famotidine 20mg
 - Gabapentin 300mg PO
 - Albuterol puffs Q4H PRN
- Diagnostic exams: x-ray, Compartment pressure testing, ultrasound.

Shanique Spence
Concept map 3

Nursing Diagnosis: Impaired mobility related to restrictive therapies (limb immobilization)

Expected Outcome: The client will increase the strength/function of affected and compensatory body parts by end of day

Interventions

1. Provide and assist with mobility aids such as wheelchairs, walkers, crutches, and canes.
2. Educate the patient to reposition periodically and encourage coughing and deep-breathing exercises.
3. Maintain a stimulating environment (radio, TV)
4. Teach the patient or assist with active and passive ROM exercises of affected and unaffected extremities.

Evaluation: The patient was able to ambulate to bathroom using walker without assistance. Goal met.

Nursing Diagnosis: Risk for pain related to nerve injury and immobility device

Expected Outcome: The patient will report 0 out of 10 pain on the pain scale throughout my shift.

Interventions

1. Elevate and support injured extremity.
2. Explain procedures before starting them.
3. Administer Gabapentin as ordered.
4. Maintain immobilization of the affected part using bed rest, cast, splint, traction.

Evaluation: The patient reported 0 out of 10 pain. Goal met.