Nyack College SON- Concept Map 1

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Nursing Dx Impaired physical mobility related to weakness in lower extremities and chronic illness as evidenced by decreased ADLs
Expected Outcome the pt will demonstrate increased ADLs performance within 2 weeks

Interventions

1. fall precautions
2. encourage ROM
3. consult PT for rehab
4. assist and educate ADLs with family

Evaluation- the pt demonstrated increased ADLs performance within 2 weeks

Past Medical History

Pancreatitis, hemorrhagic shock, anticoagulation adequate, acute respiratory failure

Dx Tests

antinuclear antibody (ANA) blood test, CBC, urinalysis

Tubule-interstitial neuropath in SLE, Mushroom allergy, Decreased ADLs, Decreased mobility and endurance, Depressed mood, Hepatitis, immune compromised, HTN, peritonitis, pulmonary emboli, status post abdo paracentesis, SLE, lupus nephritis
97.4'F(oral), 77PR, 18RR, 103/67(L), 98O2

Nursing Dx chronic pain r/t SLE as evidenced by the pt verbalized 7/10 pain
Expected Outcome the pt will report decreased pain intensity and frequency after medication administration at 0900

Interventions

1. Assess pain level using a numeric pain scale
2. Administer pain medicine as prescribed
3. Use distraction techniques to distract the pt's attention
4. Educate non-pharmacological relaxing skills

Evaluation- the pt reported decreased pain intensity and frequency after medication administration at 0900

Nursing Dx depressed mood r/t chronic illness and hospitalization as evidenced by decreased interest in daily activities
Expected Outcome the pt will participate in at least one therapeutic activity during shift

Interventions

1. assess the pt's mood and level of depression regularly
2. encourage the pt to participate in therapeutic activities
3. provide education about the connection between chronic illness and depression
4. offer support groups for the pt and the family

Evaluation- the pt participated in at least one therapeutic activity during shift

Medications

Clonidine 1eaTD MO, ergocalciferol 50000unit PO, famotidine 20mg PO, hydralazine25mg PO Q6hr, labetalol 400mg PO, lidocaine 1patch TD daily, lisinopril 40mg PO bedtime, magnesium oxide 400mg PO TID, melatonin 3mg PO bedtime PRN, mycophenolate mofetil 1000mg PO BID, nystatin 4ml MM Q1D, omeprazole 20mg PO daily, prednisone 20mg PO daily, prednisone 5mg PO daily, trimethoprim/sulfamethoxazole 2ea PO MoWeFr

Nursing Dx impaired skin integrity r/t compromised immune system as evidenced by weakened lower extremities and discoloration of toe nails
Expected Outcome the pt will maintain intact skin without redness, swelling, or drainage at the end of shift

Interventions

1. Follow standard precautions
2. Monitor VS, temperature and WBCs
3. Monitor skin integrity and hygiene regularly
4. Administer antibiotics as prescribed

Evaluation- the pt maintained intact skin without redness, swelling, or drainage at the end of shift.