

QUINSIGAMOND COMMUNITY COLLEGE
ASSOCIATE DEGREE NURSING
NUR 104

Health Assessment and Care Planning (Orem's requisites)
SAMPLE

Date: _____ Student: _____

Client Information:

Date(s) of care Oct 8, 2007 Rm# 214A Information source(s): Client, chart

Age 78 Gender M Marital status D

Reason for hospitalization (or presence in LTC facility) L knee replacement secondary to osteoarthritis

Occupation (if retired, from what?) Retired firefighter

Procedures/surgeries this hospitalization L knee replacement

Promotion of Normalcy

General client survey: VS: Temp 98.8 (method) oral

Pulse 72 rhythm reg Resp 16 BP 150/86

Pain level (1-10) 6 Location L knee, both hips

Allergies (food, drugs, contact) Shellfish Reaction seen Hives

Height 72" Weight 185 Recent gain or loss? No

Serious or chronic illnesses Hypertension, arthritis

Past Surgeries R knee replacement (4 years ago)

Hospitalizations Only for the 2 surgeries

Accidents Fell on ice and broke L wrist about 10 years ago

Any blood transfusions? No

Immunization history (age-specific) Had pneumonia vaccine – age 70 Does not recall others

Perception of own health status? "I feel very healthy"

Sociocultural: Role in family father/grandfather Recent change in role? "They don't need me much anymore"

Ethnic group/cultural heritage Emigrated from Poland with parents as a boy

Activities/ hobbies Fishing, bridge

Health habits (alternative therapies, etc.) States he tries to eat "healthy." Takes glucosamine from the health food store for arthritis

Cultural practices related to health/illness _____

Dietary requirements (if any) no restrictions

Sensory/Perceptual Processes: Vision Good Can client read normal size print? Yes

Glasses/contact lenses Glasses (bifocals) Last eye exam? 2 years ago

Hearing Feels like it's not as good as it was – could hear normal tone of voice

Aids? no Change in taste or smell? no

Significant history (head injury, chronic headaches, dizziness) When BP was high, he had increased number of headaches, only occasional now

Stress management strategies Goes fishing, listens to music

Current concerns? (child care, finances, care after discharge, job, family concerns etc.) Lives alone on one level, concerned about getting around, doing errands, etc.

Level of education (how many years were you in school?) Associate Degree Primary language English Other languages spoken Some Polish

How do you learn best? (reading, demonstration) Hands on "like how we learned firefighting"

Sexuality: (May not be appropriate to assess for every client)

Sexually active? "No, but I have a girlfriend Concerns? No

Recent changes in pattern/quality of sexual relationship? N/A

History of sexually transmitted infections? No Current symptoms? No

Females: Last normal menstrual period (if appropriate) _____ Age at menopause _____

of pregnancies _____ Living children _____

Last gynecologic exam _____ Contraceptive use _____

Monthly breast self-exam? _____

Males: Testicular self-exam? No Condom use? N/A

Males and females:

Genitalia (inspection) Normal structures Lesions None Discharge No

Health promotion issues Needs eye exam; also learn risk of HIV exposure even in the elderly population

Spirituality: Religious preference? Catholic, but does not attend regularly

Would you like to have a visit from your spiritual leader or a facility chaplain? “Not unless the end is near(laughs)” Are there any religious or spiritual practices we can assist you with during your stay?
No

Nursing Diagnoses: Anxiety related to concerns about managing ADLs upon discharge evidenced by client’s statements

Air

Oxygenation:

Smoking history (pack years = # pks per day times # of years smoking) Quit 25 years ago – 28 pack year prior to that

Cigar or pipe smoking? No Chewing tobacco No

Secondhand exposure? No

Significant past and current history (asthma or other respiratory illnesses, shortness of breath, chest pain, environmental exposures) Possible exposure while fighting fires, but no symptoms

Tolerance of exercise (dyspnea on exertion?) No, but has been limited because of arthritis # of pillows needed to sleep comfortably -1-

Respiratory rate/rhythm 18/reg Symmetry of breathing even Effort? _____

Shape of chest (barrel chest or normal 1:2 anterior/posterior to transverse diameter) 1:2 Oxygen use No Type/ amount _____ Respiratory therapy? _____

Nail color Pink Lips Pink

Cough None Productive? (color) _____ Non-productive _____

Breath sounds clear throughout Adventitious sounds None heard

Pulse ox: 96%

Circulation:

Significant history (heart disease, heart attack, stroke, high blood pressure, edema, chest pain, fatigue)
Hypertension since age 50

Heart rate/rhythm (apical pulse) 72 reg Extra sounds? No
Peripheral circulation: Skin color Sl. Pale Edema? L Lower extremity 2+
Site/severity _____
Skin temperature (warm to touch, equal bilaterally?) Sl. Warmer on L
Pulses: (present and equal) Carotid X Brachial X Radial X
Femoral X Popliteal Unable to access on L
Posterior tibial X Dorsalis pedis Sl. Weaker on left

Related lab work/diagnostic studies EKG WNL

Health promotion issues Continue to maintain healthy weight, watch consumption of prepared foods (high sodium content), med compliance

Nursing Diagnoses Altered tissue perfusion related to surgery on L leg evidenced by diminished pulse, edema

Water

Usual oral fluid intake: Amount about 1500 ml/day Type(s) fluids orange juice, coffee, diet drinks, 2 glasses water

Fluid restriction (if any) No Difficulty swallowing liquids? No

Is client able to get own drinks? Yes

Significant history (kidney disease, diabetes, other hormonal diseases) No

Intake (during your shift) 480ml

IV (intravenous fluid)? None Type _____ Infusion rate _____

Skin turgor quick recoil Mucous membranes moist? Yes

Is client diaphoretic? (sweating) some (room is warm)

Related lab work (serum electrolytes, CBC) Pre-op labs were WNL , post-op Hgb 12.4, Hct. 36 (decreased)

Health promotion issues Reduce caffeinated beverages, increase water or juice, encourage more milk intake

Nursing Diagnoses None

Food

Appetite good Changes in taste? No Smell? No
Able to feed self? Yes Number of meals per day 3 Average percent of meal taken 75% in facility Snacks likes "salty" food
Special diet/ restrictions None, but knows he is not supposed to use salt

Where does client take meals? Watching TV Favorite foods eggs, all fruits, steak, desserts
Dislikes broccoli, cabbage, fish Intolerances None Meal preparation at home (if applicable) Does use a lot of prepared foods

(May be helpful for some clients to do a 24 hour diet history)

Dentures? Yes Full/partial Partial Can client chew and swallow normally prepared foods? Yes Last dental exam 1 yr. ago Oral hygiene (how often are teeth brushed?) Once daily
Feeding tube? No
Type of supplemental feeding (oral or gastric, e.g. Boost) None

Nausea or vomiting? No

Oral cavity (inspection): Gums Appear pink and healthy Tongue Sl. coated Lesions None
Teeth present? Most present Buccal mucosa Moist, no lesions

Significant history (eating disorders, weight fluctuations, anemia) None

Related lab work Hgb and Hct decreased, as noted after surgery

Health promotion issues (is patient meeting recommended daily intake from all the food groups?)
Needs to decrease salt consumption by increasing vegetables and whole grain foods, decrease use of prepared foods, "takeout", add calcium rich foods like yogurt, milk, cheese. Healthy snacks like nuts(unsalted)

Nursing Diagnoses Nutrition: imbalanced, risk for more than body requirements related to decreased activity patterns and decreased metabolic needs

Elimination

Urinary: Usual pattern of voiding every 2-3 hours Dysuria? No Urgency? Sometimes at night
Continent of urine? Yes Able to get to bathroom/commode on own? not at present
Catheter? No, using urinal
Significant history (frequent infections, kidney disease) None

Appearance of urine: Color Yellow Clarity Clear Odor Characteristic

Output (during your shift) 800 ml

Related lab work (urinalysis, culture) Urinalysis WNL

Health promotion issues Annual prostate exam

Bowel elimination: Usual pattern Daily x1 Recent changes No Last BM 2 days ago

History of constipation? No Diarrhea? No Ostomy? No

Flatus? None Blood in stool? None Color of stool Brown

Consistency Formed soft

Use of laxatives or other aids Stool softener while recovering from surgery

Abdomen: Distended? No Soft/Firm? Soft

Bowel sounds Present in all 4 quadrants

Related lab work/ diagnostic studies None

Health promotion issues Screening colonoscopy q 10 years

Skin: (Note: skin is assessed as other body areas are assessed)

Significant history (cancer, skin diseases, easy bruising, hair loss) 2nd degree burn both arms – 30 yrs ago Color Pink Lesions (includes any broken areas) scattered brown macules, few rough patches (<1cm) on arms, varicose veins both legs

Temperature warm to touch Moisture diaphoretic

Hair White Distribution Bald on top Thickness Thin Texture Soft

If wound is present: Location L knee Redness slight at edges Edema 1+ on left lower leg

Ecchymosis None

Drainage None (describe) Approximated edges Steri-strips intact

Health promotion issues Use of sunscreen

Nursing Diagnoses Altered skin integrity related to decreased blood and nutrients to tissues secondary to surgery; Risk for constipation related to decreased peristalsis secondary to decreased mobility

Activity/Rest

Mobility: Significant history (arthritis, osteoporosis, falls, fractures) Bilateral knee replacements secondary to osteoarthritis; fx L wrist

Ability to perform ADLs? Needs assist with bath (back and legs), has concerns re shopping, cooking upon discharge (if limited, describe)

Joints (inspection and palpation) finger joints swollen Tenderness? Yes Swelling? Yes

Muscle strength (test hand grips and resistance to movement of lower extremities, if appropriate)
Strong hand grip, equal; unable to assess lower extrem due to surgery

Range of motion (assess all joints) Limitations? Knees as noted; fingers do not have full ROM, other joints with nl ROM

Exercise pattern _____ Type Walking Frequency Daily 2 miles

Mobility: Self? _____ Assistance? Yes Devices CPM machine, walker

Health promotion issues Resume exercise as prescribed by MD and PT

Sleep/Rest: Usual pattern 7 hours Current pattern 5-6 hours Naps? yes, while in facility

Sleep aids (usual, facility use) None at home, has requested sleeping med in facility

Difficulty falling asleep? No Staying asleep? Sometimes gets up to void

Bedtime routines Reads in bed

Health promotion issues Continue exercise to help with hypertension as well as improved mobility

Nursing Diagnoses Sleep pattern disturbed related to frequent awakenings secondary to frequent urination and environmental change; impaired physical mobility related to insufficient strength and endurance secondary to surgery evidenced by use of walker and limited ROM

Solitude/ Social Interaction

Use of community resources (Meals on Wheels, senior center) Senior Center for Bridge

Interactions noted Quiet but friendly Speech Clear Eye contact Yes

Appropriate responses? Yes

Grooming Clean shaven, hair combed Hygiene Daily shower

Self-concept: How would you describe yourself? I'm proud of my career as a firefighter

What is a significant event in your life? September 11 How has it affected your life? Feel sad alot Support systems? 2 sons though "I don't see enough of them" Leisure activities Fishing, bridge

Nursing Diagnoses Risk for loneliness related to difficulty accessing social events secondary to physical disability

Prevention of Hazards to Life Function and Well-being

How much alcohol do you drink per day/week? 1-2 beers/day Type _____

Do you feel safe (home, neighborhood, etc) Yes

Has any person hurt you physically during the past year? No

Is there any person you are afraid of? No (additional questions are normally asked if there is a suspicion of abuse)

Significant history (injuries, falls, dizzy spells, car accidents, loss of memory, change in mental status) **fx wrist as noted previously (fell on ice)**

Level of consciousness **alert** Oriented X 3? **yes**

Gait **N/A** Posture **Erect when seated** Pupils (PERRL-A) **PERRL-A**

Facial symmetry **Yes**

Health promotion issues **Wear rubber soled shoes or boots in winter, check for loose rugs at home**

Nursing Diagnoses **Risk for injury related to recent surgery and decreased mobility**