

**Quinsigamond Community College
 Practical Nursing Program
 Clinical Care Guide
 Semester II**

Student: _____
Date Clinical Exp: _____
Unit/Floor: _____
Cover Nurse: _____

CLIENT DATA SHEET

Client (initials) _____ Room # _____ Male/Female Allergies _____

Code Status _____ Age _____ Physician(s) _____ Surgery/Date _____

Diagnosis: _____ PMH _____

Marital Status _____ Religion _____ Occupation _____ Weight _____

Day 1 Report/Kardex Information	Day 1 End of Shift Report
Expectations -	
Day 2 Report/Kardex Information	Day 2 End of Shift Report

Diagnostic Exams/Lab Values

Na ___ Cl ___ BUN _____ Blood Sugar _____	Na ___ Cl ___ BUN _____ Blood Sugar _____
K _____ CO ² _____ Creatinine _____	K _____ CO ² _____ Creatinine _____
WBC ___ Hgb ___ Platelets _____	WBC ___ Hgb ___ Platelets _____
HCT _____	HCT _____
RBC's _____	RBC's _____

Explanation of Labs

Explanation of Labs

Self Evaluation for clinical days (strengths and weaknesses)

Assessment/Data Collection	DAY 1	DAY 2
Mental Status/Psychosocial		
Respiratory		
Cardiovascular		
Skin/Integumentary		
Pain Assessment		
Musculoskeletal		
GI		
Endocrine		
GU/Repo		
Special Senses		
Neuro		

Priority Nursing Diagnoses

Nursing Diagnosis (PES format)	All Significant Interventions
1.	
2.	

Evaluation of Plan of Care:

MEDICAL SURGICAL RESEARCH

NOTE: Textbook research may be submitted for all patients with the same diagnosis.

Diagnosis: _____
(Explain in your own words)

Cause/Etiology:

Manifestations (Signs and symptoms):

Diagnostic Exams/Lab Values:

Medical/Surgical Interventions:

Applicable Nursing Diagnoses (2):

Nursing Interventions:

Goals/Outcomes

Discharge Planning/Teaching: