Relearning: Clinical Judgment Plan of Care Template

Student Name: [redacted] **Client Initials:** G.A **Age/DOB: 78 years** **Allergies: NKDA** **BSA/BMI: 24.4** **Code Status: DNR**	**Date of Admission: 5/6 0800** **Date of Care: 5/6** **Admitting Diagnosis:** **Comorbidities: Parkinson's disease, Mild dementia, CHF,HTN** **Planned Treatments/Procedures:**

Nursing and HCP Collaborative Plan for Care: Include a description of priority client specific information, nursing actions, and provider orders	
Cultural/Spiritual: N/A Neurological/Cognition/Coping/Adaptation/Function: Alert, oriented x 2 (person and place), cooperative and obeys commands appropriately Nutrition/Elimination: Incontinent of urine: strong odor, dark amber and cloudy Fluid/Electrolytes/Acid-Base: May be imbalance Gas Exchange/Perfusion: N/A patient is on room air Glucose Regulation: NA	Health Promotion/Development: Infection/Immunity/Inflammation: Pt may have UTI Mobility: Shuffling gait while walking Pain/Comfort/Tissue Integrity: Safety: RISK FOR FALLS (intermittent dizziness with position changes) Other:

START of Shift (CJSim™) Priorities (Complete after receiving REPORT AND reviewing the EHR connected to phase 1/Question 1 section)			
Recognize & Analyze Cues	**Prioritize Hypotheses**	**Generate Solutions & Take Actions**	**Evaluate Outcomes**
Priority Assessments/Cues	**Priority Hypotheses for Nursing Care**	**Priority Interventions/Actions**	**Priority Teaching/Discharge Needs**
1. Disoriented to time/situation, word-finding difficulty, slow speech 2. Orthostatic hypotension w/dizziness and unassisted mobility attempts 3. Fine tremors/shuffling gait/muscle stiffness	1. Risk for acute confusion related to dementia 2. Risk for falls related to orthostatic changes/Parkinson's 3. Impaired physical mobility related to Parkinson's	1. Reorient frequently, ensure call environment 2. Implement fall precautions, assist with position changes 3. Notify provider, collect urine sample and maintain perineal hygiene	1. Educate client/family about asking for help 2. Teach about hydration and signs of UTI 3. Teach about low-sodium diet and fluid restriction if needed
Priority Laboratory Tests/ Diagnostic Cues	**Priority Actual & Potential Complications/Cues**	**Priority Medications**	**Priority Collaborative Actions**
1. Urinalysis w/ culture 2. Orthostatic BP monitoring 3. Electrolytes/renal panel	1. Fall related injures 2. UTI or sepsis due to infection 3. CHF exacerbation	1. Carbidopa-Levodopa 2. Rivastigmine 3. Carvedilol and Lisinopril	1. Physical therapy 2. Speech therapy 3. Wound care consult

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