

Medical Diagnosis: pneumonia, emphysema

NURSING CARE PLAN

Date: 05/11/07

<p>NANDA NURSING DIAGNOSIS (WITH ETIOLOGY/RISK FACTORS)</p>	<p>NOC BASED PATIENT OUTCOME AND MEASUREMENT SCALE</p>	<p>NIC BASED INTERVENTIONS</p>	<p>RATIONALES</p>	<p>REFLECTION/SELF ASSESSMENT</p>						
<p>Altered oral mucous membrane related to mouth breathing, decreased fluid intake and ineffective oral hygiene.</p> <p>Defining Characteristics</p> <p>Subjective:</p> <ol style="list-style-type: none"> "I have a very dry mouth & bad taste." "At times I can't breathe easily." "I want a cigarette." <p>Objective:</p> <ol style="list-style-type: none"> Lips dry and cracked and bleeding. Tongue coated. Slight dyspnea at rest with tendency toward mouth breathing. Fluid intake 600ml/24 hours. 	<p>NOC Label: Oral Hygiene</p> <p>Scale: <u> A </u></p> <p>Patient Outcome: Patient will exhibit moist, pink, intact & clean oral mucosa, tongue and lips by 5/12/07.</p> <table border="1" data-bbox="338 667 699 824"> <tr> <td>Initial Rating: <u> 2 </u></td> <td>End Rating: <u> 4 </u></td> </tr> <tr> <td>Date: <u> 5/11/07 </u></td> <td>Date: <u> 5/12/07 </u></td> </tr> <tr> <td>Time: _____</td> <td>Time: _____</td> </tr> </table> <p>Evaluative Statement: Significant progress toward outcome achievement - lips lubricated & intact, tongue cleansed of light coating, fluid intake increased to 1500ml/24 hrs. Need to reinforce pursed lip breathing. Continue with plan and evaluate on 5/14/07.</p>	Initial Rating: <u> 2 </u>	End Rating: <u> 4 </u>	Date: <u> 5/11/07 </u>	Date: <u> 5/12/07 </u>	Time: _____	Time: _____	<p>NIC Label(s): Oral Health Restoration</p> <p>Individualized Interventions:</p> <ol style="list-style-type: none"> Instruct/assist client in performing frequent oral care - before and after meals: Using a soft toothbrush gently brush inner and outer surfaces of teeth as well as gum line. Give attention to tongue and inner sides of cheeks (using a sponge brush). Rinse mouth thoroughly. Avoid mouthwashes containing alcohol . Avoid lemon-glycerin swabs. Lubricate lips every 2 hours Teach pursed-lip breathing; discourage mouth breathing. Instruct client to avoid food/fluids that are hot or cold, or acidic. Increase fluid intake of cool beverages to at least 2000ml/day. (Client prefers water or weak tea.) Monitor intake and output every 8 hours. Teach client and family about the harmful effects of smoking. (Requests cigarettes from family members and staff.) Inspect mouth for lesions, edema, white patches, inflammation, bleeding, coating on tongue, and dryness every 8 hours. 	<ol style="list-style-type: none"> Soft bristles stimulate gums, remove food debris and plaque without causing trauma. Sponge brush provides gently cleansing. Besides having a drying effect, alcohol irritates inflamed mucosa. Glycerin has an astringent effect, drying and shrinking gums and mucous membranes. Lemon (if used extensively) exhausts the salivary reflex, and can erode tooth enamel. Proper lip care replaces moisture and reduces cracking. Inhaling through nose and exhaling through pursed lips helps to manage dyspnea. Mouth breathing promotes mucosal drying. Temperature extremes and acidic fluids/foods cause pain and irritation to sensitive oral mucosa. Fluid balance and avoidance of dehydration are essential to achieve healthy mucosa. Tobacco use, including smoking, irritates the oral mucosa and can cause cancer. Chemicals that are known tumor promoters have been detected in tobacco and cigarette smoke. To compare to baseline assessment/to note further disturbance in oral mucosa/to monitor responses to interventions. 	<p>"I felt very comfortable caring for this patient. I found myself doing a lot of teaching with her - much more so than with any other patient I have had.</p> <p>I felt that it was a very good experience. It gave me confidence that she was able to follow <u>my</u> direction. I felt a good sense of accomplishment at the end of the day."*</p> <p>* Actual Nursing Care Plan Reflection Statement by a NURS 1010 student. (Reprinted with permission).</p>
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Date: <u> 5/11/07 </u>	Date: <u> 5/12/07 </u>									
Time: _____	Time: _____									
<p>COLUMN I</p>	<p>COLUMN II</p>	<p>COLUMN III</p>	<p>COLUMN IV</p>	<p>COLUMN V</p>						

MEASUREMENT SCALES USED IN NOC *

Scale	1	2	3	4	5
A	Severely compromised	Substantially compromised	Moderately compromised	Mildly compromised	Not compromised
B	Severe deviation from normal range	Substantial deviation from normal range	Moderate deviation from normal range	Mild deviation from normal range	No deviation from normal range
F	Not adequate	Slightly adequate	Moderately adequate	Substantially adequate	Totally adequate
G	10 and over	7-9	4-6	1-3	None
H	Extensive	Substantial	Moderate	Limited	None
I	None	Limited	Moderate	Substantial	Extensive
K	Never positive	Rarely positive	Sometimes positive	Often positive	Consistently positive
L	Very weak	Weak	Moderate	Strong	Very strong
M	Never demonstrated	Rarely demonstrated	Sometimes demonstrated	Often demonstrated	Consistently demonstrated
N	Severe	Substantial	Moderate	Mild	None
R	Poor	Fair	Good	Very Good	Excellent
S	Not at all satisfied	Somewhat satisfied	Moderately satisfied	Very good	Excellent
T	Consistently demonstrated	Often demonstrated	Sometimes demonstrated	Rarely demonstrated	Never demonstrated

* Johnson, M., & Maas, M. & Moorhead, S., (2004), Nursing Outcomes Classification (NOC) (3rd ed.), St. Louis: Mosby, p. 44-48