Nursing notes

Date / time	Notes
4/4 20 30	Admitted to ward via A and E at 1800 hours. Admission for investigation into confusion with a history of confusion 1-2 years. Usually mobile with a stick. Patient not for resuscitation — discussed with family and documented in notes. Lives in hostel normally independent but recently more confused and aggressive. Full assistance required with ADL's on admission. Requires incontinence aids. Catheter inserted in A and E — patient removed balloon intact. Some bleeding as a result. Patient given Haloperidol and Diazepam on admission to ward — reasonably settled at time of report. Charted for PRN meds for agitation overnight. For psych review in a.m. Encourage diet and fluid. Attended Head CT — NAD. Temp 37.2.
5/4/ 0510	Patient settled overnight. Incontinent. Special in place no episodes of aggression so far this shift. Small amount of bleeding from penis following self removal of catheter in A and E. Obs satisfactory continue special.
5/4 1255	Patient found of floor at commencement of shift. Had climbed out of bed and hit head. Assisted back to bed. Obs stable. Cut above right eye – steri strips in place. Dr attended and sutured x3 to laceration on scalp. Very drowsy, unable to take meds due to drowsiness. Very poor fluid intake. ?may require IV therapy? However, may not tolerate same.
6/4 1455	Requiring full assistance with ADL's. Incontinent of urine. Sat out of bed but complaining of being tired – returned to bed at 11a.m. Complaining of pain (? Lower leg?) Dr informed. Paracetamol given with good effect. Temp 38.
7/4 2130	Patient restless this shift obs stable, full assist with ADL's. Haloperidol given as charted.
8/4 0230	Woke up panicking temp 37. Unable to measure BP Patient looked confused. Paracetamol and Haloperidol given as charted.
8/4 0700	Patient very erratic. Trying to get out of bed. Medication given as per chart no effect. Dr informed and larger dose of haloperidol given. Settled for a while now getting agitated again. Temp 38 managed to take Paracetamol but refused antibiotic.
8/4 1900	Refusing most diet and fluid. Small sips of water only. Urine remains blood stained. Only passing small amounts. Refusing medication. Discussed antibiotics with team will require does this a.m. Very drowsy. Contact daughter if condition changes.
9/4 1450	Much improved this am. Alert and orientated at times. Taking good diet and fluid. Incontinent still. Small bowel action will require laxative tonight. Still sleepy. Daughter visited.

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and difficulties involving patients families and other health care professionals Suggestions are given for avoiding legal pitfalls involving telephone orders medication reactions patients who refuse care and much more A section addresses computerized documentation HIPAA confidentiality rules use of PDAs nursing informatics and electronic innovations that will soon be Documentation, 2007 This full color handbook is a quick reference guide to all aspects of documentation for universal every nursing care situation It covers current documentation systems and formats including computerized documentation and features scores of sample filled in forms and in text narrative notes illustrating everything from everyday occurrences to emergency situations Coverage includes timesaving strategies for admission to discharge documentation in acute outpatient rehabilitation long term and home care environments and special documentation practices for selected clinical specialties critical care emergency perioperative maternal neonatal and psychiatric The book includes advice on legal safeguards dangerous abbreviations and compliance with HIPAA guidelines and JCAHO requirements **Acute Pain Management** Raymond S. Sinatra, Oscar A. de Leon-Cassasola, Eugene R. Viscusi, Brian Ginsberg, 2009-04-27 This textbook is written as a comprehensive overview of acute pain management It is designed to guide clinicians through an impressive array of different options available to them and to patients There has been a flurry of interest in the extent to which acute pain can become chronic pain and how we might reduce the incidence of such chronicity This overview covers a wide range of treatments for pain management including the anatomy of pain pathways the pathophysiology of severe pain pain assessment therapeutic guidelines analgesic options organization of pain services and the role of anesthesiologists surgeons pharmacists and nurses in providing optimal care It also discusses the use of patient controlled analgesia and how this may or may not be effective and useful Documenting Care Frances Talaska Fischbach, 1991 University of Wisconsin Milwaukee School of Nursing s comprehensive charting and documentation manual for students and practitioners **Fundamentals: Perspectives on the Art and Science of Canadian Nursing** david Gregory, Tracey Stephens, Christy Raymond-Seniuk, Linda Patrick, 2019-01-03 Publisher's Note Products purchased from 3rd Party sellers are not guaranteed by the Publisher for guality authenticity or access to any online entitlements included with the product Master the unique multi faceted role of the Canadian nurse Confidently embark on a lifelong learning journey and prepare for the daily realities of Canadian nursing practice this with comprehensive Canadian focused text Developed specifically for your needs by talented Canadian students practicing nurses scholars and educators Fundamentals Perspectives on the Art and Science of Canadian Nursing 2nd Edition delivers an integrated understanding of nursing fundamentals through a continuum that guides you from one chapter to the next and from learning to understanding New Inter Professional Practice helps you achieve positive patient outcomes through effective collaboration with the healthcare team New Diversity Considerations alert you to important patient care considerations related to culture sexuality gender economics visible minorities and religious beliefs New NCLEX style questions at the end of each chapter test your retention and ready you for success on your exams Revised Skills chapters

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