Nursing Process: Plan of Care for your Patient

DATA	NURSING DIAGNOSIS	GOAL	NURSING INTERVENTIONS	RATIONALES	EVALUATION
Subjective Data None Stage 2 Sacral Left heel Blanchable erythema on Right posterior thigh.	Risk for impaired tissue integrity related to bed bound as evidenced by muscle weakness.	Patient skin will remain intact throughout the shift.	-Asses skin every two hours -reposition every two hours. -Provide education to the patient and caregivers about the prevention plan and ways to minimize the risk of pressure injury."	"Skin assessment provides information related to the patient's current status and detects impending or actual alterations in skin integrity." (Lynn, 2019, p.428) "Repositioning reduces the duration and magnitude of pressure over vulnerable areas of the body and provide comfort, hygiene, dignity and functional ability". (Lynn, 2019, p.427) "Explanation encourages patient understanding and cooperation	met (patient's skin remained intact throughout the shift)

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M Mark

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The Enigmatic Realm of **Restorative Nursing Care Plan Template**: Unleashing the Language is Inner Magic

In a fast-paced digital era where connections and knowledge intertwine, the enigmatic realm of language reveals its inherent magic. Its capacity to stir emotions, ignite contemplation, and catalyze profound transformations is nothing in short supply of extraordinary. Within the captivating pages of **Restorative Nursing Care Plan Template** a literary masterpiece penned with a renowned author, readers attempt a transformative journey, unlocking the secrets and untapped potential embedded within each word. In this evaluation, we shall explore the book is core themes, assess its distinct writing style, and delve into its lasting impact on the hearts and minds of people who partake in its reading experience.

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