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LPC 3/91/031

WESTERN HEALTH & SOCIAL SERVICES BOARD - ERNE HOSPITAL

043-033-063

Date	Activity of Living Problem	Goal	Nursing Intervention	Date & Time of Evaluation	Prescriber's Signature	Discontinued Date and Signature
	CARDIOVASCULAR					
	1. Actual/potential.	Early detection and	E.C.G. Monitoring. ✓			
10/11/80	Unstable heart due to:	correction.	Observe for and record any arrhythmias. ✓ Administer prescribed medication.		[Signature]	
13/1/80	2. Actual/potential	Early detection and	Record vital signs ½ — 1 hourly. Condition dependent			
14/1/80	unstable blood pressure due to:	correction.	Report and abnormality. ✓ Administer prescribed medication. Monitor C.V.P. 1 hourly.		[Signature]	
	3. Actual/potential		Check base-line observations.			
	low HB — due to:		Administer blood as prescribed.			
			Check for any reaction.			
			Record temp/pulse rate resp rate ¼ hourly.			
Name: Lucy Crawford	Hospital Number: 123000	Ward: S114				

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	NUTRITION, FLUIDS & METABOLISM					
	1. Naso-gastric tube.	Prevent aspiration of gastric contents. Enable Enteral Nutrition.	Free drainage. Aspirate hourly and record. Check tube is in correct position. Administer prescribed fluids.			
13/4/80			Sig 14 Salem Sump passed orally - No contents in stomach. - NG removed		M.B.I.	
	2. Unable to tolerate N/G feeding so has Parenteral Nutrition.	Prevent complications.	Infuse fluids at prescribed rate. Daily dressing. Observe central line site. Change giving sets daily. Observe for patency.			
Name:	Lyn Crawford	Hospital Number:	123000	Ward:		

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Date	Activity of Living Problem	Goal	Nursing Intervention	Date & Time of Evaluation	Prescriber's Signature	Discontinued Date and Signature
	NUTRITION, FLUIDS & METABOLISM (CONTD.)					
	3. Unstable blood glucose	Detect/Report abnormality.	Monitor blood glucose _____ hourly. Insulin as prescribed. Monitor glucose in urine _____ hourly.			
	Diabetes/Parenteral Nutrition.					
12/4/80	4. Actual/Potential disturbances of fluid balance.	Early detection and correction.	Accurate recording of fluid intake/output. Infuse fluids ✓ at correct rate. C.V.P. Monitoring _____ hourly.		[Signature]	
	Verbal to R/R head				[Signature]	
	5. Actual/Potential Electrolyte Imbalance.	Early detection and correction.	Check urea and electrolytes daily. 9.00 a.m. Administer fluids/electrolytes as prescribed.			
Name:	LUCY Crawford	Hospital Number: 123000	Ward: S/A/CU			

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043-033-070

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