**Formulating Nursing Diagnoses**

Examine the following case study and formulate at least 2-3 nursing diagnosis applicable to each situation.

1. Mrs. Stein is 3 weeks postoperative for a total hip replacement. She has developed a severe post-operative wound infection. She does not complain of discomfort in the operative site; however, she complains of a painful, burning sensation in the sacral region.

**Assessment:**

BP 110/78

HR 88

RR 20

T 101.1 F

“My hip aches all the time and it hurts more when I move”

“I don’t want to move my hip; it hurts less this way”

“Please don’t move my bed”

* Upon a total body skin assessment, with special attention to the sacral area, reactive hyperemia is noted over the sacral area; this area does not blanch upon palpation.
* Skin over sacrum is blistered and has an abrasion.
* No other areas are noted to be open, with the exception of the surgical site.

***What nursing diagnoses can you identify with this client?***

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Connie, a nurse in a surgeon’s office is preparing Mr. Holland for a colon resection, which is scheduled in one week. Mr. Holland is 75 years old and has recently been diagnosed with colorectal cancer. Connie’s assessment focuses on Mr. Holland’s readiness to learn and factors that might affect his ability to understand the procedure and related postoperative care.

**Assessment:**

* Upon assessing what the surgeon has already told Mr. Holland about the surgery, he responds, “I can’t remember what the doctor told me at my last appointment. But, I need to know how to take care of myself. My surgery is scheduled for next week.”
* Mr. Holland is unable to describe post-operative care or provide a return demonstration of deep breathing and coughing.
* Mr. Holland states he has difficulty seeing small print.

***What nursing diagnoses can you identify with this client?***

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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4. Mrs. Mary Smyth is a 46 year old housewife. She has enrolled in a cardiovascular disease prevention (CDP) program prescribed by her physician and conducted by Erich Sieple, a registered nurse. Erich’s assessment included a discussion of Mrs. Smyth’s current health problem, as well as a pertinent physical assessment.

**Assessment Activities:**

1. Ask Mary what prompted her MD to recommend a CDP program

* She responds “I gained 50 pounds over the past year. I become easily fatigued and lack the energy to keep up with even simple household chores. I don’t want to leave the house anymore”

1. Ask Mary about her exercise and eating habits.

* She responds, “I want to exercise but with the demands of child care and taking care of my aging parents, I just don’t feel like it. I feel pulled in every direction, that increases my stress, then I want to eat, eat, and eat!”

1. Perform baseline assessment.

* Height 5 feet 3 inches
* Weight 225 lbs. (102 kg)
* BP 152/90 mm Hg (at rest)
* Pulse 96 bpm (at rest)
* RR 20 breaths per min (at rest)

1. Assess endurance.

* Level 2-3=moderately to substantially compromised. Erich rated Mary’s endurance using the nursing outcomes classification (NOC):

1=extremely compromised

2=substantially compromised

3=moderately compromised

4=mildly compromised

5=not compromised

BP: 164/96 mm Hg (climbing 10 steps)

Pulse: 120 bpm (climbing 10 steps)

Breathing rate: 36 breaths per minute (climbing 10 steps)

***What nursing diagnoses can you identify with this client?***

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_