

3/22/2020 12:32 PM (CDT)

Assessment Id: 63963037

Patient: Dawe, Mary A (Admission PPE-78074SN)

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*Handwritten:*  
 M. P. P. P.  
 3/22/2020

## Risk Assessment Clinical Action Plan

### Assessment Date:

02/25/2020

### Client Demographics

#### Name:

Dawe, Mary A

#### Date of Birth:

06/24/1927

#### Age:

92

#### Gender:

F

#### Physician:

Yunez, Karim S

#### Client ID:

175612

#### Admit Date:

02/19/20

#### Room #:

315

#### Admission ID:

PPE-78074SN

#### Facility:

Park Place

#### Admitting Diagnosis:

### Reason For Visit:

Admitting Risk Assessment

L femur fx s/p cephalomedullary fixation

### HPI:

92yo female admitted to La Grange 1/26/20 after falling. Ortho consulted for L femur fx and performed cephalomedullary nail L femur on 1/27/20. Then had post-op PE and anemia. Had peg tube placed on 2/1/20. Pt then sent to La Grange rehab and on 2/11/20 was readmitted to La Grange for AMX and lethargy. Hgb was 7 and pt was having black tarry stools. 2 units of blood given. CT brain was neg for acute findings. GI consulted and performed EGD who showed large duodenal bulb ulceration with bleeding and performed sclerosing. IR consulted and performed mesenteric angiogram and GDA embolization. WBC elevated, ID consulted for sepsis, so started on IV Zosyn. BC were neg x2. Nephro consulted for anasarca and started on albumin. Pulm consulted for SOB and poss asp PNA. Cardio consulted after pt went into a-fib 2/2 anemia. Participated in therapy.

Pt admitted to Park Place on 2/19/20 for SAR.

L: 5

A: 7

C: 5

E: 1

Total: 18

Pt seen today for RA regarding L femur fx s/p cephalomedullary fixation. Pt in bed, alert, NAD. Denies CP, HA, SOB, dizziness, n/v/c/d, fever, chills. Reports no pain in hip but has mild pain in sacrum from wound. Participating in therapy. Sitter at bedside.

*Am APRN*  
*3/22/2020*

PMH: HTN, FIT, hypernatremia, dysphagia, CVA, falls  
PSH: hysterectomy, oophorectomy, s/p PEG tube

**Allergies:**

No

**Describe:****Past Medical History: Please check box if applicable)**

CHF Risk

A. Fib Post Op

Pneumonia / COPD Risk

Other Cardiac / Vascular Hx

HTN

UTI Risk

Dehydration Risk

CVA Post Op

Pain Risk

Recent Surgery

DVT / PE Risk

Sepsis

Other PMH

PMH: HTN, FIT, hypernatremia, dysphagia, CVA, falls

PSH: hysterectomy, oophorectomy, s/p PEG tube

**Personal and Social History and Advanced Directives**

Psychosocial Hx:

Advanced Care Plan

DNR Married

POA Name:

Tobacco use: (risk for CAD, PVD, DVT and COPD)

No / Never

Quit Date:

/ /

Pack / Years

Smoking Cessation Plan

**Review Of Systems:**

Const

Fever

No

Mental Status

No

Function

Yes

Weight

No

Pain

Yes

Resp

SOB

No

Cough

No

Wheezing

No

Phlegm

Jm APEN  
3/22/2020

No		
Hx Smoking		
No		
GU		
Dysuria		
No		
Hematuria		
No		
Frequency		
No		
Urgency		
No		
Nocturia		
No		
Foley		
No		
MS		
Joint Pain		
No		
Swelling		
No		
Myalgia		
No		
Arthralgia		
No		
ROM		
Yes		
Fall last 30 days		
Yes		
Hx of falls		
Yes		
Gait D/O		
Yes		
HEENT		
Eye discharge		
No		
Visual		
No		
HOH		
No		
Epistaxis		
No		
Rhinitis		
No		
Tinnitus		
No		
Sore Throat		
No		
GI		
Nausea		
No		
Vomiting		
No		
Obesity		
No		
Abd Pain		
No		
Diarrhea		
No		
Constipation		
No		

*Alm open*  
*3/22/2020*

<b>Melena</b> No			
<b>Heme-occult</b>			
<b>Dysphagia</b> Yes			
<b>Dyspepsia</b> No			
<b>Appetite</b> Yes			
<b>Stools</b> No			
<b>G tube</b> Yes			
<b>Neuro</b>			
<b>Syncope</b> No			
<b>Aphasia</b> No			
<b>HA</b> No			
<b>Vertigo</b> No			
<b>Focal Weakness</b> No			
<b>Paraesthesia</b> No			
<b>Seizures</b> No			
<b>Confused</b> No			
<b>PSYCH</b>			
<b>Anxiety</b> No			
<b>Depression</b> No			
<b>Sleep Disturbance</b> No			
<b>Agitation</b> No			
<b>Combative</b> No			
<b>Hallucinations</b> No			
<b>Psychosis</b> No			
<b>NL Mood</b> Yes			
<b>CV/PV</b>			
<b>Chest Pain</b> No			
<b>Palpitations</b> No			
<b>Dizzy</b> No			
<b>DOE</b> No			
<b>Edema</b> Yes			
<b>DERM</b>			
<b>Rash</b> No			

*Sh* *3/22/2020***Pruritus**

No

**Bruising**

No

**Activity / MS:**

Muscle Tone / Strength wnl for age

Other

**Psych:****Affect:**

Appropriate

Other

**Skin:**

Warm

**Skin Turgor:**

Good

If Abn or wound describe

DSG to buttocks is CDI. L hip incision is free of redness and drainage, DSG is CDI. Peg tube to abd is free of drainage

**HEENT:**

Normal Dry Oral Pharynx

Describe:

**Neck:**

No lymphadenopathy

JVD

No

Other:

**Pulm:**

CTA Respirations unlabored

Other:

on 4L satng 95%

**CV:**

RRR w/o M or G

Other:

**PV Disease:**

Pulse Normal

Other:

**Abd:**

Soft, NT, ND Normative BS

Other:

PEG tube present

**GU:**

No Bladder Distension No Suprapubic Tenderness No CVA Tenderness

Other:

**Neuro:**

*Shaffer 3/22/2020*

Speech Clear Sustain Focus No Tremor Sensory fn intact Motor fn intact Intact Memory Memory at Baseline  
Other:

**Active Pain:**

No

Pain Level (Verbal, 1-10)

Pain Tolerable:

Sites:

**IV Access:**

Type of access

Indwelling Foley

Condition of site:

Describe:

*Sm [Signature]  
3/22/20*

3/22/2020 12:32 PM (CDT)

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Patient: Dawe, Mary A (Admission PPE-78074SN)

**Vital Signs****B/P:**

125 / 59

**Pulse:**

96.00 [ Pulse Oximeter]

**Pulse Ox:**

94.00 [ Room Air]

**Respirations:**

16.00

**Temp:**

98.00 [ Oral]

**Weight:**

135.00

**Blood Sugar:**

*Shirley*  
3/22/2020

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Patient: Dawe, Mary A (Admission PPE-78074SN)

**Current / Adjusted Medications****Medication Orders Reviewed and Updated****Medications reviewed for Polypharmacy**

piperacillin-tazobactam 3.375 gram intravenous solution (3.375 GRAM) VIAL (EA) Every Eight Hours for Three Days  
 Intravenous ICD-10: PNEUMONIA, UNSPECIFIED ORGANISM furosemide 40 mg tablet (1 TAB) TABLET One Time  
 Daily for Three Days G-tube ICD-10: GENERALIZED EDEMA ipratropium 0.5 mg-albuterol 3 mg (2.5 mg base)/3 mL  
 nebulization soln (1 NEBULE) AMPUL FOR NEBULIZATION (ML) Three Times Daily Nebulization ICD-10:  
 PNEUMONITIS DUE TO INHALATION OF FOOD AND VOMIT ipratropium 0.5 mg-albuterol 3 mg (2.5 mg base)/3 mL  
 nebulization soln (1 NEBULE) AMPUL FOR NEBULIZATION (ML) As Needed Every Four Hours Nebulization ICD-10:  
 PNEUMONITIS DUE TO INHALATION OF FOOD AND VOMIT Epogen 10,000 unit/mL injection solution (1ML=10,000  
 UNITS) VIAL (ML) One Time Weekly Subcutaneous ICD-10: ANEMIA, UNSPECIFIED acetaminophen 325 mg tablet (2  
 TABS) TABLET As Needed Every Six Hours G-tube ICD-10: PAIN, UNSPECIFIED folic acid 1 mg tablet (1 TAB) TABLET  
 One Time Daily G-tube ICD-10: VITAMIN DEFICIENCY, UNSPECIFIED multivitamin with minerals tablet (1 TAB)  
 TABLET One Time Daily G-tube ICD-10: VITAMIN DEFICIENCY, UNSPECIFIED olopatadine 0.1 % eye drops (1 DROP)  
 DROPS As Needed Two Times Daily Both Eyes ICD-10: OTHER CHRONIC ALLERGIC CONJUNCTIVITIS Miralax 17  
 gram oral powder packet (17 gm) POWDER IN PACKET (EA) As Needed Every One Day G-tube ICD-10:  
 CONSTIPATION, UNSPECIFIED acetaminophen 325 mg tablet (2 tablets = 650mg) TABLET As Needed Every Six Hours  
 G-tube ICD-10: PAIN, UNSPECIFIED Aplisol 5 tub. unit/0.1 mL intradermal injection solution (0.1 ml (Step 2)) VIAL (ML)  
 One Time Daily for One Day Intradermal ICD-10: ENCOUNTER FOR SCREENING FOR RESPIRATORY  
 TUBERCULOSIS Aplisol 5 tub. unit/0.1 mL intradermal injection solution (Read Results (Step 2)) VIAL (ML) One Time  
 Daily for One Day Other ICD-10: ENCOUNTER FOR SCREENING FOR RESPIRATORY TUBERCULOSIS Xifaxan 550  
 mg tablet (1 TAB) TABLET Two Times Daily for Twenty-Two Days G-tube ICD-10: HEPATIC FAILURE, UNSPECIFIED  
 WITHOUT COMA Osmolite 1.2 Cal 0.06 gram-1.2 kcal/mL oral liquid (65ml/hr) LIQUID (ML) By Shift G-tube ICD-10:  
 DYSPHAGIA, UNSPECIFIED Fish Oil 1,600 mg-500 mg-800 mg/5 mL oral liquid (3.125 ML= 1000 MG) LIQUID (ML) One  
 Time Daily G-tube ICD-10: VITAMIN DEFICIENCY, UNSPECIFIED timolol maleate 0.25 % eye drops (1 DROP) DROPS  
 Two Times Daily Both Eyes ICD-10: UNSPECIFIED GLAUCOMA MediHoney (honey) 80 % topical gel (1 application)  
 GEL (ML) One Time Daily Topical ICD-10: PRESSURE ULCER OF SACRAL REGION, STAGE 3 Bion Tears (FF) 0.1  
 %-0.3 % drops in a dropperette (1 drop) DROPPERETTE, SINGLE-USE, DROP DISPENSER As Needed Four Times  
 Daily Both Eyes ICD-10: DRY EYE SYNDROME OF UNSPECIFIED LACRIMAL GLAND omeprazole 20 mg  
 capsule, delayed release (1 cap) CAPSULE, DELAYED RELEASE (ENTERIC COATED) Two Times Daily G-tube ICD-10:  
 HEARTBURN aspirin 81 mg chewable tablet (1 tab) TABLET, CHEWABLE One Time Daily Oral ICD-10: UNSPECIFIED  
 ATRIAL FIBRILLATION furosemide 40 mg tablet (1) TABLET Every One Day G-tube ICD-10: GENERALIZED EDEMA  
 Santyl 250 unit/gram topical ointment (9.4 cm) OINTMENT (GRAM) One Time Daily Topical ICD-10: PRESSURE ULCER  
 OF SACRAL REGION, STAGE 3 Santyl 250 unit/gram topical ointment (9.4 cm) OINTMENT (GRAM) As Needed Topical  
 ICD-10: PRESSURE ULCER OF SACRAL REGION, STAGE 3 metoprolol tartrate 25 mg tablet (1) TABLET Two Times  
 Daily G-tube ICD-10: ESSENTIAL (PRIMARY) HYPERTENSION ipratropium 0.5 mg-albuterol 3 mg (2.5 mg base)/3 mL  
 nebulization soln (1) AMPUL FOR NEBULIZATION (ML) Four Times Daily Inhalation ICD-10: FRACTURE OF  
 UNSPECIFIED PART OF NECK OF LEFT FEMUR, SUBSEQUENT ENCOUNTER FOR CLOSED FRACTURE WITH  
 ROUTINE HEALING, ESSENTIAL (PRIMARY) HYPERTENSION ipratropium 0.5 mg-albuterol 3 mg (2.5 mg base)/3 mL  
 nebulization soln (1) AMPUL FOR NEBULIZATION (ML) Four Times Daily Inhalation ICD-10: FRACTURE OF  
 UNSPECIFIED PART OF NECK OF LEFT FEMUR, SUBSEQUENT ENCOUNTER FOR CLOSED FRACTURE WITH  
 ROUTINE HEALING, ESSENTIAL (PRIMARY) HYPERTENSION furosemide 100 mg/100 mL (1 mg/mL) In 0.9 % sod  
 chloride IV piggyback (40 mg) INTRAVENOUS SOLUTION, PIGGYBACK (ML) One Time Daily for One Day Intravenous  
 ICD-10: GENERALIZED EDEMA morphine concentrate 100 mg/5 mL (20 mg/mL) oral solution 100 mg/5 mL (20 mg/mL)  
 (0.25 ml) SOLUTION, ORAL As Needed Every Two Hours Oral ICD-10: PAIN, UNSPECIFIED

**Medical Risk Identification and Plan****Diagnosis:****CHF Plan****Status:****Plan: (Select all applicable interventions)****Diagnosis:****Dehydration / Low Fluid Volume****Status:****Plan: (Select all applicable interventions)****Diagnosis:****Pneumonia / COPD**



*Don Aptow*  
3/22/2020

**Status:**

Stable

**Plan: (Select all applicable interventions)**

\* Pneumovax if has not had in 5 years \* Influenza vaccine if flu season \* If diet general and swallowing concern - Video Swallow \* Activity orders \* Incentive Spirometry - order hand held, if patient does not have  
\* Keep HOB at 30 degrees while in bed \* PPI with no diagnosis - consider discontinue \* Pulse Ox at least daily - Oxygen for desaturation < 90% to be maintained at baseline \* Schedule Nebulizer Treatment  
\* Bronchodilator Scheduled or PRN

**Diagnosis:**

Coronary Artery Disease

**Status:****Plan: (Select all applicable interventions)****Diagnosis:**

UTI

**Status:****Plan: (Select all applicable interventions)****Diagnosis:**

Pain

**Status:**

Stable

**Plan: (Select all applicable interventions)**

\*Pain level patient report \*Appropriate medication per pain level and type of pain

**Diagnosis:**

DVT/PE

**Status:**

Stable

**Plan: (Select all applicable interventions)**

\*Activity orders

**Other:**

2/25/20: HgB 9.4, HCT 31.0

2/24/20: CXR neg, Na 143, K 4.4, BUN 25, Cr 0.61, WBC 5.4, HgB 9.4, HCT 30.2

2/23/20: HgB 8.5, HCT 27.7

2/20/20: Na 140, K 4.2, BUN 23, Cr 0.48, WBC 6.8, HgB 8.9, HCT 28.9

hospital labs: 2/17/20 WBC 17.09, HgB 8.8, HCT 28.2, Na 145, K 3.8, BUN 31, Cr 0.77

hospital labs: 2/14/20 WBC 11.74, HgB 5.9, HCT 19.4

hospital labs: 2/11/20 WBC 22.72, HgB 7.7, HCT 24.5, Na 141, K 4.7, BUN 48, Cr 0.59

**Conversation with Attending:****Assessment and Plan:**

L femur fx/L hip pain/Weakness/Falls (S72.002D/M25.552/M62.81/R29.6)

s/p L femur cephalomedullary nail

ortho following

cont PT/OT

fall precautions

on ASA for DVT prevention

on PRN Tylenol for pain

afebrile, WBC stable

cont to monitor

CVA with dysphagia/HTN

s/p peg tube

on ASA

cardio, ST, and RD following

*Km Hill*  
APRN  
3/22/2020

cont to monitor

PE/Pulm congestion/Poss PNA  
stable  
on ASA and Lasix with PRN nebs  
on IV Zosyn via  
RT and pulm following  
cont to monitor

GIB/anemia  
improving  
on PPI, Epogen, and folic acid  
cont to monitor

Sacral wound  
stable  
wound care following  
turn pt Q2 to reduce pressure  
afebrile, WBC stable  
cont to monitor

Confusion 2/2 hepatic failure  
improving  
on xifaxan  
cont to monitor

Kathryn Hill MS APRN

Printed Name:  
X

Signature:

Electronically Signed By Hill, Kathryn 02/25/2020 10:08 AM (CST)