FLORIDA INTERNATIONAL UNIVERSITY
Nicole Wertheim College of Nursing and Health Sciences
CLINICAL WORKSHEET: NURSING PROCESS CARE PLAN

STUDENT NAME _____ DATE _____

	Social Determinants of Health: This header can be placed above occupation. It includes occupation, health insurance, current work status, etc.	
Unit Room/Bed	Religion	Support system
Age Sex	Language	
Weight Height BMI	Marital status	
Current medical diagnosis	Occupation	Siblings
	Health insurance	Name of significant other/primary caregiver
	Current work status	
	Highest grade completed	Genogram: Use back of page
	Alcohol/Smoking/ Drug use/Sexual and Reproductive health	
Diagnostic Data and Results:		
Surgical procedures (current and past):		
Past Health History:		

History of Present Illness:

Health Assessment

Physical Assessment:

HEENT:

NEURO:

CV:

RESP:

GI:

GU:

MUSCULOSKELETAL:

INTEG:	
ENDOCRINE:	
HEMATOLOGIC:	
Pathophysiology (please write in your own words) – Cite References in APA format	Baseline and current vital signs/Frequency
	Allergies/Side effects
	Diet with rationale
	Activity order

_____ _____ _____ _____ _____ _____	_____ _____ _____ Limitations/prosthetic devices _____ _____ _____ _____

Include all Pertinent Laboratory Data Results (normal and abnormal)	Include all Pertinent Laboratory Data Results (normal and abnormal)	Include all Pertinent Laboratory Data Results (normal and abnormal)	Include all Pertinent Laboratory Data Results (normal and abnormal)
PERTINENT LABORATORY DATA Lab Test #1 _____ _____ Results_____ _____ _____ _____ _____ Rationale of abnormal results _____ _____ _____ _____ _____	PERTINENT LABORATORY DATA Lab Test #2 _____ _____ Results_____ _____ _____ _____ _____ Rationale of abnormal results _____ _____ _____ _____ _____	PERTINENT LABORATORY DATA Lab Test #3 _____ _____ Results_____ _____ _____ _____ _____ Rationale of abnormal results _____ _____ _____ _____ _____	PERTINENT LABORATORY DATA Lab Test #4 _____ _____ Results_____ _____ _____ _____ _____ Rationale of abnormal results _____ _____ _____ _____ _____

INTRAVENOUS SOLUTION #1 Type _____ ML/HR _____ gtts/min _____ Additives _____ Rationale for solution _____ _____ _____	INTRAVENOUS SOLUTION #2 Type _____ ML/HR _____ gtts/min _____ Additives _____ Rationale for solution _____ _____ _____
INTRAVENOUS SOLUTION #3 Type _____ ML/HR _____ gtts/min _____ Additives _____ Rationale for solution _____ _____ _____	INTRAVENOUS SOLUTION #4 Type _____ ML/HR _____ gtts/min _____ Additives _____ Rationale for solution _____ _____ _____

MEDICATION NAME BRAND/GENERIC CLASSIFICATION	DOSE / ROUTE ORDERED	TIMES ADMINISTERED	RATIONALE FOR ADMINISTERING	THERAPEUTIC RANGE FOR AGE/WEIGHT If Applicable	NURSING IMPLICATIONS Required Patient Education	**CITATIONS**

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NURSING THEORIST	CITE REFERENCES
NURSING DIAGNOSES - **NANDA** LIST IN PRIORITY ORDER (BEGINNING WITH #1 IN PRIORITY)	DESCRIBE RATIONALE FOR PRIORITY ORDER UTILIZE THEORY (NEEDS THEORY/NURSING THEORY) FOR RATIONALE

SAMPLE DIRECTION PAGE: Do not leave in when turning care plan into Faculty					
ASSESSMENT DATA SUBJECTIVE/ OBJECTIVE/ CONTRIBUTING FACTORS	NURSING DIAGNOSIS **NANDA**	PLAN OUTCOME CRITERIA (CLIENT CENTERED) Must flow from Diagnosis and be individualized	INTERVENTIONS (NURSE CENTERED) **Cite References**	RATIONALE FOR INTERVENTIONS	EVALUATION
Include subjective and objective components. Assess physiological, psychosocial, developmental, cultural and spiritual dimensions. •Subjective Document client's exact words relevant to the diagnosis. "I'm not hungry" •Objective Document data that is measurable, specific, and relevant to the nursing diagnosis. "Weight = 48 Kg" "Lack of subcutaneous fat"	Use a NANDA diagnosis which has three (3) parts: •Part I: NANDA statement of nursing problem "Alternation in nutrition: Less than body requirements" •Part 2: relating to a nursing etiology: "relating to inadequate nutritional intake" •Part 3: manifested by the assessed signs and symptoms: "manifested by low body weight and emaciation."	State the overall plan as client centered, e.g.,: •**"The client will..."** Relate the plan to the nursing diagnosis: •."have adequate nutritional intake" Indicate a measurable outcome criteria by including time frame/amount/range: •"as evidenced by..." 1) the ability to create a balanced meal plan by day (7). 2) gaining 1-2 lbs/wk until FDA recommended weight is achieved. (3) etc.	Make the interventions nurse centered. Indicate what the nurse will do to assist the client in achieving the outcome criteria, e.g., •The nurse will..." State frequency/time /amount so any nurse can carry out the plan: 1) Document all food intake for 3 days. 2) Determine and make available client's favorite foods by day 2. 3) etc.	State the principle or scientific rationale for the nursing intervention(s). Include the reference for the rationale.	Look at the outcome criteria. State whether the client achieved the outcome criteria, e.g., "The client gained 2 lbs within the past 7 days..." NOTE: If the outcome criteria was not achieved or only partially achieved, the nurse needs to go back to the beginning, e.g., the "assessment" and make revisions or changes as necessary.

ASSESSMENT DATA SUBJECTIVE/ OBJECTIVE/ CONTRIBUTING FACTORS	NURSING DIAGNOSIS **NANDA (North American Nursing Diagnosis Association)**	PLAN OUTCOME CRITERIA (CLIENT CENTERED) Must flow from Diagnosis and be individualized	INTERVENTIONS (NURSE CENTERED) **Cite References**	RATIONALE FOR INTERVENTIONS	EVALUATION

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Discharge Plan / Patient Teaching