

Type: Essay

Subject: Issues in Nursing

Subject area: Nursing

Education Level: Undergraduate

Length: 2 pages

Referencing style: APA

Preferred English: US English

Spacing Option: Double

Title: Chronic kidney disease

Instructions: st. francis school of nursing care plan and article • complete a clinical documentation tool related to your clinical assignment. • all areas of the clinical documentation tool must be completed (use client initials only). • submit with your clinical documentation tool and one professional nursing journal article (no greater than 5 years) that relates to the diagnosis of your specific client. include a summary of how the information relates to your client's diagnosis, nursing interventions, medication, and how you will use this information to update your plan of care for this client. the paper and article should be in apa format. • the nursing care plan needs to be completed correctly, as this assignment is designed to ensure you are able to prioritize patient care, compile clinical data using clinical judgment while analyzing the nursing process as it relates to your patient health status. the assignment consist of completing the care plan found on blackboard, complete each section and its entirety (with the exception of the wid sheet). when documenting abnormal labs, you must provide what each lab is indicative of. i.e. hemoglobin of 6.9, low indicative of blood loss, ckd, aplastic anemia etc. md notified and an order for prbc ordered. • the assignment must be typed and submitted electronically to your instructor's email by the due date as provided. your article must be attached, along with your paper and your care plan. • the article should be either the admitting diagnosis or the past medical history that is secondary to the admitting diagnosis. i.e. admitted with osteomyelitis of the right foot however pmh of diabetes ii. so essentially, you could find an article on osteomyelitis or diabetes type ii. • the article should be a synopsis that is read and analyzed in two pages discussing the article's relevance and how it pertains to your patient's diagnosis, interventions, medications, outcomes and patient education. lastly, what you learned from the chosen article and how your patient will benefit from this information. • a title and reference page must be included as well as apa formatting (12 pt. times new roman, double-space etc.) which is not associated with the two pages listed. in total, four pages should be submit, a title, two pages (no more than) from the article and a reference page. no wikipedia or any websites that are not credible such as blogs, forums or etc. no abstract! it may be necessary to use your textbooks in addition to others as references to support your data. a guide can be found from purdue owl:

https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/general_format.html • 5 point will be deducted for every day that it is late.

Chronic Kidney Disease Care Plan

Name

Affiliation

Course Code

Supervisor

Date

Introduction

Chronic Kidney disease is usually the end results of the continued and progressive loss of Kidney function. According to the international Diabetes Federation, it estimates that 537 million people were living with diabetes in 2021, the number is expected to increase to 784 million by 2045(Boer et al., 2022). In the United States, Diabetes is the most common cause of Kidney failure which will require kidney transplantation or dialysis. The loss of kidney function to some patients could be a bit show that one does not witness the symptoms until the kidney condition almost stops working (Chicca, 2020). During the final stage of chronic kidney disease of CKD, it means that the kidney may no longer be in a position to remove enough waste or fluid excesses from the body, this is when one will required a kidney transplant or a dialysis.

The care plan will be based on a 74 year old male patient named T.C. apart from having chronic Kidney disease (CKD) the patient also has a medical history of dementia, hypertension, type II diabetes, Hyperlipidemia and A-FIB . Based on the patient symptoms the care plan objective is to treat the cases of renal failure because the patient labs indicate that the creatine levels are at 3.15 which is an indication that the kidneys are not working properly (Chicca, 2020). These are signs of a patient who is bound for Kidney failure. The body will feel weak and the patient will experience fatigue, malaise and weakness. According to the lab reports indicated that; Bun: 51, Creatine: 3.15, Hgb 10.9, HCT 32.5 and GFR 15. The patient is also currently using motorprolol, nefidepine, Atorvastatin, Eliquis, Humalog insulin (sliding scale) of which these medications are important in preventing the risk of stroke, control the patient blood pressure and manage his diabetic condition (Chicca, 2020). The care plan thus focusses on treatment and management of the patient renal condition. According to Boer et al., (2022), given that the patient is also diagnosed with diabetes and CKD, these conditions and the creatine level of 3.15 he is likely to have kidney failure and premature mortality because of other conditions

such as HCT. In the care plan, some of the approaches that will be used include; accurate I/O which is important for checking patient's fluid replacement and renal function. Due to inability of the Kidney to process fluid, is also important to conduct body weight checks for a period of 8 days at the same time with the same clothes to see whether the weight has been reduced, usually edema will also occur independently on the patient tissues such as; hands, feet and lumbosacral (Boer et al., 2022). Also given that the patient is a candidate for kidney failure, dialysis will be very important since fluid overload could limit and prevent cardiac manifestation which includes pericardial effusion and hypertension.

Conclusion

In conclusion, the article by Boer et al., (2022) recommends that patients with CKD should be treated with a comprehensive care plan, also based on the patient assessment, the care plan needs to be agreed by the nurse and eh patient together. By doing so there will be positive optimization of exercise, nutrition, weigh, smoking cessation, all of which have been layered under the evidence-based pharmacological therapies to ensure that the patient organ functions well and other selected therapies to realize and intermediate targets like the right level of blood pressure, Hgb and lipids.

References

- Boer, I. H., Khunti, K., Sadusky, T., Tuttle, K. R., Neumiller, J. J., Rhee, C. M., Rosas, S. E., Rossing, P., & Bakris, G. (2022). Diabetes management in chronic kidney disease: A consensus report by the American Diabetes Association (ADA) and kidney disease: Improving global outcomes (KDIGO). <https://doi.org/10.2337/figshare.20272404>
- Chicca, J. (2020). Adults with chronic kidney disease: Overview and nursing care goals. *America Nurses Association*.
<https://www.myamericannurse.com/adults-with-chronic-kidney-disease-overview-and-nursing-care-goals/>