Valley Health System

Community Nurse Case Management

Problem List and Plan of Care

CNCM Name _____ Client Name: _____

Date	Problem Name	Initial Admit Rating K	B	S	Goals (Long Term) *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A

Valley Health System

Community Nurse Case Management

Problem List and Plan of Care

CNCM Name _____ Client Name: _____

(Line through text = NOT APPLICABLE)

Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Medication Management (Potential for alteration in medication compliance)				Goal: Client will take medications as prescribed by primary care provider (PCP).	
					1. RN will obtain PCP orders for medications.	
					2. RN will update medication list as appropriate, including Rx, OTC, and herbal.	
					3. Client will verbalize understanding of medication regimen.	
					4. Client will be able to verbalize possible side effects of medications.	
					5. RN will assist client with obtaining medications, as appropriate.	
					6. Client will utilize medication/pill box appropriately.	
					7. RN will fill medication/pill box with medications as prescribed by PCP.	

Valley Health System

Community Nurse Case Management

Problem List and Plan of Care

CNCM Name _____ Client Name: _____

(Line through text = NOT APPLICABLE)

Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Respiratory Status (Potential for or alteration in gas exchange r/t inadequate airway clearance)				Goal: Client will exhibit symptoms of optimal gas exchange.	
					1. RN will instruct client in the following: • S/Sx of respiratory infection • Effective coughing and deep breathing • S/Sx of hypoxemia • Energy conservation	
					2. RN will instruct client when to call MD or 911.	
					3. RN will assess lung/respiratory status using stethoscope and pulse oximetry, as appropriate.	
					4. RN will obtain PCP order for pulse oximetry use, as appropriate.	
					5. RN will instruct patient in use of inhalers and/or nebulizer, as appropriate.	
					6. Client will verbalize understanding of S/Sx of respiratory infection.	
					7. Client will demonstrate effective body positioning for maximum airway availability.	
					8. Client will follow prescribed respiratory regimens of care, including medications.	
					9. Client will use O_2 as ordered by PCP.	

Valley Health System

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Integumentary (Potential for or alteration in skin integrity)				Goal: Client will have intact skin surface (or absence of S/Sx of infection from skin breakdown).	
					1. Client will verbalize understanding of self-care management of skin.	
					2. RN will provide education on the following: • Proper handwashing • S/Sx of wound/skin infection • Diet and hydration • Activity and/or any limitations	
					3. Client will list at least 3 S/Sx of infection and appropriate PCP notification.	
					4. Client will verbalize importance of adequate nutrition/hydration for maintenance of skin integrity and/or wound healing.	
					5. RN will assess for pain.	

Valley Health System

Community Nurse Case Management

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Mental Status (Potential for anxiety, depression, or ineffective coping)				Goal: Client will exhibit reduction in S/Sx of anxiety/depression/impaired thought processes with more effective coping abilities to optimize functional abilities in a safe environment. *(Circle those that apply)*	
					1. RN will instruct client on the following: • Disease process, if applicable • Medication compliance • Safety in the home	
					2. RN will give positive feedback to client and reinforce compliance with prescribed regimens of care.	
					3. RN will encourage client to seek appropriate support systems.	
					4. RN will encourage client to verbalize feelings, concerns, thoughts.	
					5. Client will develop a therapeutic relationship with RN.	
					6. Client will identify S/Sx of anxiety/depression/impaired thought processes.	
					7. Client will demonstrate compliance with medications as prescribed by PCP.	

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Medical Cardiac (Potential for or alteration in cardiac output and/or alteration in fluid volume r/t CHF				Goal: Client will demonstrate understanding of disease process and self-care management.	
					1. RN will instruct client on the following: • Definition/causes of CHF • S/Sx of exacerbation of CHF • Treatment measure of CHF • Complications of CHF • S/Sx of electrolyte imbalance • Energy conservation • Skin care and assessment of peripheral edema • Prescribed regimens of care, including medications, weight, pulse	
					2. RN will instruct client when to call MD or 911.	
					3. RN will assess cardiac and respiratory status using stethoscope and pulse oximetry, as appropriate.	
					4. RN will obtain PCP order for pulse oximetry use, as appropriate.	
					5. Client will verbalize understanding of CHF.	
					6. Client will follow prescribed regimens of care, including medications, elevation of extremities.	
					7. Client will record daily weights.	
					8. Client will use O_2 as ordered by PCP.	

Valley Health System

Community Nurse Case Management

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(Line through text = NOT APPLICABLE)

Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Hypertension (Potential for or alteration in blood pressure)				Goal: Client will demonstrate understanding of disease process and self-care management.	
					1. RN will instruct client on the following: • Definition/causes of hypertension • S/Sx of hypertension • Treatment of hypertension • Complications of hypertension • Risk behaviors to alter (e.g., smoking, activity level, diet) • Orthostatic hypotension • Stress reduction • Prescribed regimens of care including diet, medications	
					2. RN will instruct client when to call MD or 911.	
					3. RN will assess blood pressure.	
					4. Client will verbalize understanding of hypertension.	
					5. Client will follow prescribed regimens of care, including medications.	

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Pain Management (Potential for or alteration in comfort level)				Goal: Client will demonstrate effective level of pain control.	
					1. RN will instruct client on the following: • Use of pain scale and desired level of pain control • Nonmedication methods of pain/symptom control • Activity progression plan • Ways to maintain GI function • S/Sx of constipation and ways to relieve	
					2. RN will assess/reassess client level of pain.	
					3. Client will verbalize intensity of pain on pain scale, frequency, and duration.	
					4. Client will verbalize understanding of nonmedication methods of pain control (e.g., imagery, relaxation techniques, biofeedback).	
					5. Client will alert RN to possible constipation or concerns with GI function (e.g., nausea, vomiting, heartburn).	
					6. Client will follow prescribed regimens of care, including medications.	

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Nutrition (Potential for or alteration in nutritional status)				Goal: Client will follow diet prescribed by PCP.	
					1. RN will instruct client on the following: • Proper diet: _____ • Adequate hydration and/or fluid restriction • Effects of activity/exercise	
					2. RN will assess client compliance with diet.	
					3. Client will verbalize understanding and compliance with diet.	
					4. Client will monitor weight.	
					5. RN will consult/refer to dietician as appropriate.	

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Diabetes (Alteration in metabolism of glucose and production of insulin)				Goal: Client will verbalize/demonstrate understanding of diabetes disease process and self-care management. OR Blood sugars will be within normal limits for patient. *(Circle one.)*	
					1. RN will instruct client on the following: • S/Sx of hypoglycemia and corrective actions to take • S/Sx of hyperglycemia and corrective actions to take • Appropriate diet • Medications that alter blood glucose • Effect of activity/exercise on blood sugar/insulin • Glucose monitoring, including handwashing before fingerstick	
					2. Client will follow prescribed regimens of care, including medications and fingersticks.	
					3. Client will verbalize S/Sx of hypoglycemia and hyperglycemia and actions to take.	
					4. Client will verbalize understanding and compliance with diabetic diet and importance of regularly scheduled meals and snacks.	
					5. RN will assess/review blood sugar fingerstick log.	

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Community Nurse Case Management

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Coronary Artery Disease (Potential for inadequate tissue perfusion r/t decreased circulation)				Goal: Client will demonstrate understanding of disease process and self-care management.	
					1. RN will instruct client on the following: • Definition/causes of CAD • S/Sx of exacerbation of CAD • Treatment measures of CAD • Complications of CAD • Skin care and assessment of peripheral edema • Prescribed regimens of care, including medications	
					2. RN will instruct client when to call MD or 911.	
					3. RN will assess cardiac and respiratory status using stethoscope and pulse oximetry, as appropriate.	
					4. RN will obtain PCP order for pulse oximetry use, as appropriate.	
					5. Client will verbalize understanding of CAD.	
					6. Client will follow prescribed regimens of care, including medications, elevation of extremities.	
					7. Client will use O_2 as ordered by PCP.	

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Community Nurse Case Management

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CNCM Name _____ Client Name: _____

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Safety (Potential for harm, injury, or risk r/t environment)				Goal: Client will maintain safe environment.	
					1. RN will identify safety hazards in the environment (e.g., objects, situations, people).	
					2. RN will remove hazards from the environment and/or modify the environment to minimize hazards (when possible) and with client permission.	
					3. RN will instruct client on the following: • Safe environment • Minimizing safety hazards and risk • Use of protective devices (e.g., side rails, locked doors, repaired fences or gates)	
					4. RN will monitor the client and the environment for changes in safety status.	

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	Financial (Actual or potential for financial concerns r/t limited resources)				Goal: Client will have access to appropriate resources.	
					1. RN will identify client resource needs (e.g., medical, financial aid, environmental, access).	
					2. RN will provide information on possible resources to client.	
					3. Client will access appropriate resources. *(List all applicable resources.)*	
					4. RN will make referrals for client, as applicable.	

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Visual Deficit (Potential for or actual vision deficit r/t disease process and/or previous injury)				Goal: Client will accept and learn alternate methods for living with diminished vision.	
					1. RN will assess client's reaction to diminished vision (e.g., denial, depression, withdrawal).	
					2. RN will not move items in client environment without first informing client.	
					3. RN will refer client to appropriate resources (e.g., agency, healthcare provider).	
					4. RN will fill medication box, if applicable.	
					5. RN will instruct patient in maintaining a safe environment.	

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Community Nurse Case Management

Problem List and Plan of Care

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Bowel Management (Potential for or alteration in bowel elimination)				Goal: Client will establish and maintain a regular pattern of bowel elimination.	
					1. RN will monitor client for S/Sx of diarrhea, constipation, and/or impaction.	
					2. RN will instruct client on good nutrition and hydration, as well as specific foods that are assistive in promoting bowel regularity.	
					3. Client will monitor and report changes in patterns of bowel elimination.	
					4. Client will take medications as prescribed.	

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Community Nurse Case Management

Problem List and Plan of Care

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Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Renal (Potential for or actual renal insufficiency r/t disease process)				Goal: Client will follow prescribed regimens of care to maximize renal sufficiency.	
					1. RN will instruct client on the following: • Definition/causes of renal insufficiency • S/Sx of fluid and electrolyte imbalances • Treatment measures (e.g., dialysis) • Appropriate diet/nutrition (as directed) • Complications of renal insufficiency • Energy conservation • Skin care and assessment of peripheral edema • Prescribed regimens of care, including medications, weight, pulse	
					2. RN will instruct client when to call MD or 911.	
					3. RN will refer client to physician when S/Sx of fluid and/or electrolyte imbalance persist or worsen.	
					4. Client will monitor the following, as appropriate: • Weight • Fluid intake • Peripheral edema • Skin color, turgor • Changes in sensorium/alertness	
					5. Client will verbalize understanding of renal insufficiency.	
					6. Client will follow prescribed regimens of care, including medications, elevation of extremities.	

Valley Health System

Community Nurse Case Management

Problem List and Plan of Care

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(Line through text = NOT APPLICABLE)

Date	Problem Name	Initial Admit Rating K	B	S	Goals and Planned Interventions *(See Intervention Flow Sheet for Interventions specific to each client visit)*	Problem Resolved, D/C Date or N/A
	Hepatic (Potential for or actual alteration in liver function 2° to disease process)				Goal: Client will follow prescribed regimens of care to maximize hepatic function.	
					1. RN will instruct client on the following: • Definition/causes of liver disease • S/Sx of fluid and electrolyte imbalances and ascites • Treatment measures (e.g., dialysis) • Appropriate diet/nutrition (as directed) • Complications of liver insufficiency • Energy conservation • Pain management (as applicable) • Skin care and assessment of peripheral edema • Prescribed regimens of care, including medications, weight, pulse	
					2. RN will instruct client when to call MD or 911.	
					3. RN will refer client to physician when S/Sx of fluid and/or electrolyte imbalance persist or worsen.	
					4. Client will monitor the following, as appropriate: • Weight • Fluid intake • Peripheral edema • Ascites and/or girth measurement • Skin color and turgor • Fatigue • Pain management • Changes in sensorium/alertness	
					5. Client will verbalize understanding of liver insufficiency.	
					6. Client will follow prescribed regimens of care, including medications, elevation of extremities.	