

Chapter 1 : Medsurg Notes: Nurse's Clinical Pocket Guide by Ehren Myers

nursing school nursing student med surg nursing students new nurses everything i need little book pocket handy notes clinical helpful tool clinicals study convenient studying useful bigger concise Showing of 80 reviews.

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intervention. The nurse retains accountability for the delegation. Sample of nursing tasks that cannot be delegated: The RN delegates a task but retains responsibility and accountability. Specialized nursing skills and nursing judgment cannot be delegated. The triggering event is something unexpected. It may be as obvious as crushing chest pain or as subtle as a complaint of thirst. Big red flags are easy to see; do not ignore tiny red flags. Recognize differences and similarities. Is the problem hypotension? Think about the factors that influence blood pressure: What is the hemoglobin level, urinary output, recent blood loss? Can you assess cardiac output? Is the patient on medications that affect blood pressure? Ask if the laboratory values or tests suggest a cause. Do the data suggest something is worsening? Do you need to assess another body system? Have you asked the patient about all recent related events? Should you check the medication record? Does the patient require referral to a religious leader? Does the family need to see a social worker? Ask yourself if the data can be interpreted another way. Ask yourself what other issues or conditions could cause similar signs and symptoms. For nurses who are thinking critically about a problem, this conclusion is a nursing diagnosis or a definition of the problem. State the desired outcomes as well and in what time frame you expect them to be achieved. Is it imperative that you act immediately? Do you need help? Pose new questions to yourself every day. Ask yourself why a certain complication occurs or why a medication helps. Find out the answers. Ask others; consult the literature. Read journals and other literature. Realize that everybody makes assumptions and that assumptions can be wrong. Ask yourself what else might be responsible for the signs and symptoms. All practitioners fundamentally are teachers. Patients in chronic pain may not exhibit signs of being in pain. Look for ways to better manage pain. Keep dosage schedules simple. Use prevention strategies, especially for constipation when opioids are used. Dosages change, and different drugs may not provide as much pain relief. Use an equianalgesic dosing table for guidance.

Chapter 2 : RNNotes® : Nurse's Clinical Pocket Guide, 4th Edition - F.A. Davis Company

MedSurg Notes, 2nd Edition provides information in one handy pocket guide. With over 65 common clinical situations addressed, MedSurg Notes is a pocketful of confidence.

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I have RNNotes-Nurse's Clinical Pocket Guide-by Ehren Myers. I debated between that and the MedSurg, decided on this one, can't remember why. It seems very complete.

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