IMPAIRED VERBAL COMMUNICATION CARE PLAN

IMPAIRED VERBAL COMMUNICATION CARE PLAN IS AN ESSENTIAL COMPONENT IN NURSING AND HEALTHCARE MANAGEMENT FOR PATIENTS WHO EXPERIENCE CHALLENGES IN EXPRESSING THEMSELVES VERBALLY. THIS CARE PLAN ADDRESSES THE VARIOUS FACTORS THAT CONTRIBUTE TO VERBAL COMMUNICATION DIFFICULTIES, INCLUDING NEUROLOGICAL DISORDERS, SPEECH IMPAIRMENTS, COGNITIVE DEFICITS, AND EMOTIONAL BARRIERS. DEVELOPING AN EFFECTIVE CARE PLAN INVOLVES COMPREHENSIVE ASSESSMENT, GOAL SETTING, INTERVENTION STRATEGIES, AND ONGOING EVALUATION TO OPTIMIZE PATIENT COMMUNICATION ABILITIES AND ENHANCE OVERALL CARE QUALITY. THIS ARTICLE EXPLORES THE KEY ELEMENTS OF AN IMPAIRED VERBAL COMMUNICATION CARE PLAN, INCLUDING ASSESSMENT TECHNIQUES, COMMON NURSING DIAGNOSES, EVIDENCE-BASED INTERVENTIONS, AND MEASURABLE OUTCOMES. IT ALSO HIGHLIGHTS THE IMPORTANCE OF INTERDISCIPLINARY COLLABORATION AND THE USE OF ASSISTIVE COMMUNICATION DEVICES. BY UNDERSTANDING AND IMPLEMENTING A STRUCTURED IMPAIRED VERBAL COMMUNICATION CARE PLAN, HEALTHCARE PROFESSIONALS CAN IMPROVE PATIENT ENGAGEMENT, REDUCE FRUSTRATION, AND PROMOTE BETTER HEALTH OUTCOMES. THE FOLLOWING SECTIONS WILL DELVE INTO EACH ASPECT IN DETAIL TO PROVIDE A THOROUGH UNDERSTANDING OF THIS CRITICAL NURSING PROCESS.

- Understanding Impaired Verbal Communication
- ASSESSMENT IN IMPAIRED VERBAL COMMUNICATION CARE PLAN
- Nursing Diagnoses Related to Impaired Verbal Communication
- INTERVENTION STRATEGIES FOR IMPAIRED VERBAL COMMUNICATION
- GOALS AND OUTCOMES IN THE CARE PLAN
- DOCUMENTATION AND EVALUATION

UNDERSTANDING IMPAIRED VERBAL COMMUNICATION

IMPAIRED VERBAL COMMUNICATION REFERS TO A DECREASE, DELAY, OR ABSENCE IN THE ABILITY TO RECEIVE, PROCESS, TRANSMIT, AND EXPRESS INFORMATION THROUGH SPOKEN LANGUAGE. THIS CONDITION CAN STEM FROM A WIDE RANGE OF CAUSES, INCLUDING STROKE, TRAUMATIC BRAIN INJURY, DEVELOPMENTAL DISORDERS, MENTAL HEALTH CONDITIONS, OR PHYSICAL IMPAIRMENTS AFFECTING SPEECH MECHANISMS. THE SIGNIFICANCE OF RECOGNIZING IMPAIRED VERBAL COMMUNICATION LIES IN ITS IMPACT ON PATIENT SAFETY, EMOTIONAL WELL-BEING, AND THE ABILITY TO PARTICIPATE ACTIVELY IN HEALTHCARE DECISIONS. EFFECTIVE MANAGEMENT REQUIRES AN IN-DEPTH UNDERSTANDING OF THE UNDERLYING ETIOLOGY, THE DEGREE OF COMMUNICATION LOSS, AND THE PATIENT'S INDIVIDUAL NEEDS.

CAUSES OF IMPAIRED VERBAL COMMUNICATION

VARIOUS MEDICAL AND PSYCHOLOGICAL CONDITIONS CAN LEAD TO IMPAIRED VERBAL COMMUNICATION. THESE CAUSES MAY INCLUDE:

- NEUROLOGICAL DISORDERS: SUCH AS APHASIA FROM STROKE, PARKINSON'S DISEASE, OR MULTIPLE SCLEROSIS.
- STRUCTURAL ABNORMALITIES: INCLUDING CLEFT PALATE OR LARYNGEAL DAMAGE.
- DEVELOPMENTAL DISABILITIES: LIKE AUTISM SPECTRUM DISORDERS OR INTELLECTUAL DISABILITIES.
- PSYCHIATRIC ILLNESS: SUCH AS SCHIZOPHRENIA OR SEVERE ANXIETY AFFECTING SPEECH.
- TEMPORARY CONDITIONS: INCLUDING POST-SURGICAL EFFECTS OR MEDICATION SIDE EFFECTS.

Types of Communication Impairments

COMMUNICATION IMPAIRMENT CAN MANIFEST IN SEVERAL FORMS, INCLUDING:

- APHASIA: DIFFICULTY IN PRODUCING OR UNDERSTANDING SPOKEN LANGUAGE.
- DYSARTHRIA: SLURRED OR SLOW SPEECH CAUSED BY MUSCLE WEAKNESS.
- MUTISM: COMPLETE INABILITY OR REFUSAL TO SPEAK.
- EXPRESSIVE OR RECEPTIVE COMMUNICATION DEFICITS: PROBLEMS IN FORMULATING OR COMPREHENDING VERBAL MESSAGES.

ASSESSMENT IN IMPAIRED VERBAL COMMUNICATION CARE PLAN

COMPREHENSIVE ASSESSMENT IS THE CORNERSTONE OF AN EFFECTIVE IMPAIRED VERBAL COMMUNICATION CARE PLAN. IT INVOLVES SYSTEMATIC EVALUATION OF THE PATIENT'S COMMUNICATION ABILITIES, COGNITIVE FUNCTION, SENSORY STATUS, AND EMOTIONAL STATE. ACCURATE ASSESSMENT HELPS IDENTIFY THE SPECIFIC NATURE AND EXTENT OF COMMUNICATION IMPAIRMENT, GUIDING TARGETED INTERVENTIONS.

KEY COMPONENTS OF COMMUNICATION ASSESSMENT

ASSESSMENT TYPICALLY INCLUDES:

- HISTORY TAKING: GATHERING INFORMATION ABOUT THE ONSET, DURATION, AND PROGRESSION OF COMMUNICATION DIFFICULTIES.
- Physical examination: Evaluating oral motor function, Hearing acuity, and Neurological Status.
- Speech and Language evaluation: assessing articulation, fluency, comprehension, and voice quality.
- COGNITIVE SCREENING: IDENTIFYING ANY ASSOCIATED COGNITIVE DEFICITS THAT MAY AFFECT COMMUNICATION.
- ENVIRONMENTAL FACTORS: CONSIDERING NOISE, LIGHTING, AND DISTRACTIONS THAT MAY IMPACT COMMUNICATION.

USE OF STANDARDIZED TOOLS

SEVERAL VALIDATED INSTRUMENTS CAN BE EMPLOYED TO ASSESS VERBAL COMMUNICATION IMPAIRMENT, SUCH AS THE WESTERN APHASIA BATTERY, THE BOSTON DIAGNOSTIC APHASIA EXAMINATION, OR THE COMMUNICATION ACTIVITIES OF DAILY LIVING SCALE. UTILIZING THESE TOOLS ENSURES OBJECTIVE DATA COLLECTION AND FACILITATES CONSISTENT MONITORING OF PATIENT PROGRESS.

NURSING DIAGNOSES RELATED TO IMPAIRED VERBAL COMMUNICATION

FORMULATING ACCURATE NURSING DIAGNOSES IS VITAL FOR STRUCTURING A FOCUSED CARE PLAN. IMPAIRED VERBAL COMMUNICATION ITSELF IS RECOGNIZED AS A NURSING DIAGNOSIS AND MAY BE ACCOMPANIED BY RELATED DIAGNOSES REFLECTING UNDERLYING CAUSES OR CONSEQUENCES.

COMMON NURSING DIAGNOSES

- IMPAIRED VERBAL COMMUNICATION: PRIMARY DIAGNOSIS INDICATING DIFFICULTY IN EXPRESSING OR RECEIVING VERBAL MESSAGES.
- RISK FOR ASPIRATION: WHEN COMMUNICATION PROBLEMS INTERFERE WITH SAFE SWALLOWING.
- Social Isolation: RESULTING FROM INABILITY TO COMMUNICATE EFFECTIVELY WITH OTHERS.
- IMPAIRED SOCIAL INTERACTION: DIFFICULTY IN ENGAGING IN SOCIAL EXCHANGES DUE TO COMMUNICATION BARRIERS.
- SITUATIONAL LOW SELF-ESTEEM: ARISING FROM FRUSTRATION OR EMBARRASSMENT LINKED TO COMMUNICATION DEFICITS.

DIAGNOSTIC STATEMENT EXAMPLE

AN EXAMPLE OF A NURSING DIAGNOSIS STATEMENT FOR A PATIENT WITH IMPAIRED VERBAL COMMUNICATION MIGHT BE: "IMPAIRED VERBAL COMMUNICATION RELATED TO EXPRESSIVE APHASIA AS EVIDENCED BY DIFFICULTY IN WORD FINDING AND INABILITY TO FORM COHERENT SENTENCES."

INTERVENTION STRATEGIES FOR IMPAIRED VERBAL COMMUNICATION

EFFECTIVE INTERVENTIONS FOCUS ON ENHANCING COMMUNICATION ABILITIES, COMPENSATING FOR DEFICITS, AND SUPPORTING PSYCHOSOCIAL WELL-BEING. THESE STRATEGIES ARE INDIVIDUALIZED BASED ON THE PATIENT'S SPECIFIC NEEDS AND THE UNDERLYING CAUSE OF IMPAIRMENT.

DIRECT COMMUNICATION TECHNIQUES

HEALTHCARE PROVIDERS CAN EMPLOY VARIOUS METHODS TO FACILITATE COMMUNICATION, INCLUDING:

- USING SIMPLE, CLEAR LANGUAGE AND SHORT SENTENCES.
- ALLOWING EXTRA TIME FOR THE PATIENT TO RESPOND.
- ENCOURAGING NONVERBAL COMMUNICATION SUCH AS GESTURES, FACIAL EXPRESSIONS, AND WRITING.
- CONFIRMING UNDERSTANDING BY REPEATING OR REPHRASING MESSAGES.
- MINIMIZING ENVIRONMENTAL DISTRACTIONS TO IMPROVE FOCUS.

Assistive Communication Devices

ASSISTIVE TECHNOLOGIES CAN SIGNIFICANTLY IMPROVE COMMUNICATION OUTCOMES. EXAMPLES INCLUDE:

- PICTURE BOARDS OR COMMUNICATION BOOKS.
- Speech-generating devices or apps.
- ALPHABET OR WORD BOARDS.

SIGN LANGUAGE OR MANUAL COMMUNICATION SYSTEMS.

THERAPEUTIC INTERVENTIONS

COLLABORATION WITH SPEECH-LANGUAGE PATHOLOGISTS IS ESSENTIAL FOR STRUCTURED THERAPY AIMED AT RESTORING VERBAL COMMUNICATION SKILLS. INTERVENTIONS MAY INCLUDE:

- SPEECH THERAPY EXERCISES TARGETING ARTICULATION, FLUENCY, AND LANGUAGE COMPREHENSION.
- COGNITIVE-COMMUNICATION THERAPY TO IMPROVE ATTENTION AND MEMORY RELATED TO COMMUNICATION.
- FAMILY EDUCATION AND INVOLVEMENT TO PROMOTE SUPPORTIVE COMMUNICATION ENVIRONMENTS.

GOALS AND OUTCOMES IN THE CARE PLAN

SETTING REALISTIC, MEASURABLE GOALS IS CRITICAL TO EVALUATING THE EFFECTIVENESS OF THE IMPAIRED VERBAL COMMUNICATION CARE PLAN. GOALS SHOULD BE PATIENT-CENTERED AND FOCUSED ON IMPROVING COMMUNICATION ABILITIES AND QUALITY OF LIFE.

EXAMPLES OF CARE PLAN GOALS

- THE PATIENT WILL USE ALTERNATIVE COMMUNICATION METHODS EFFECTIVELY TO EXPRESS BASIC NEEDS WITHIN ONE WEFK.
- THE PATIENT WILL DEMONSTRATE IMPROVED SPEECH CLARITY AS EVIDENCED BY INCREASED SUCCESSFUL VERBAL EXCHANGES DURING NURSING INTERACTIONS.
- THE PATIENT WILL PARTICIPATE IN SOCIAL ACTIVITIES WITH MINIMAL COMMUNICATION FRUSTRATION WITHIN ONE MONTH.
- THE PATIENT'S FAMILY WILL REPORT INCREASED UNDERSTANDING AND ABILITY TO SUPPORT COMMUNICATION STRATEGIES.

OUTCOME EVALUATION

REGULAR EVALUATION SHOULD DOCUMENT PROGRESS TOWARD GOALS, NOTING IMPROVEMENTS OR CHALLENGES. ADJUSTMENTS TO THE CARE PLAN MAY BE REQUIRED BASED ON ONGOING ASSESSMENT FINDINGS AND PATIENT FEEDBACK.

DOCUMENTATION AND EVALUATION

ACCURATE DOCUMENTATION OF THE IMPAIRED VERBAL COMMUNICATION CARE PLAN, INTERVENTIONS, AND PATIENT RESPONSES IS ESSENTIAL FOR CONTINUITY OF CARE AND LEGAL COMPLIANCE. IT FACILITATES COMMUNICATION AMONG HEALTHCARE TEAM MEMBERS AND SUPPORTS QUALITY IMPROVEMENT INITIATIVES.

KEY DOCUMENTATION ELEMENTS

- INITIAL ASSESSMENT FINDINGS AND NURSING DIAGNOSES.
- SPECIFIC INTERVENTIONS IMPLEMENTED AND PATIENT PARTICIPATION.
- PATIENT OUTCOMES AND PROGRESS TOWARD GOALS.
- COMMUNICATION WITH INTERDISCIPLINARY TEAM MEMBERS.
- Changes in the care plan based on evaluation results.

IMPORTANCE OF ONGOING EVALUATION

CONTINUOUS MONITORING ENSURES THAT THE CARE PLAN REMAINS RELEVANT AND EFFECTIVE. IT ALLOWS FOR TIMELY IDENTIFICATION OF NEW ISSUES OR SETBACKS, ENABLING PROMPT INTERVENTION AND ADAPTATION OF STRATEGIES TO MEET EVOLVING PATIENT NEEDS.

FREQUENTLY ASKED QUESTIONS

WHAT IS IMPAIRED VERBAL COMMUNICATION IN NURSING CARE?

IMPAIRED VERBAL COMMUNICATION REFERS TO THE DIFFICULTY OR INABILITY OF A PATIENT TO EFFECTIVELY EXPRESS OR RECEIVE MESSAGES THROUGH SPOKEN LANGUAGE, WHICH CAN BE DUE TO PHYSICAL, COGNITIVE, OR EMOTIONAL FACTORS.

WHAT ARE COMMON CAUSES OF IMPAIRED VERBAL COMMUNICATION IN PATIENTS?

COMMON CAUSES INCLUDE STROKE, TRAUMATIC BRAIN INJURY, NEUROLOGICAL DISORDERS, APHASIA, HEARING IMPAIRMENT, DEVELOPMENTAL DISABILITIES, AND PSYCHOLOGICAL CONDITIONS SUCH AS ANXIETY OR DEPRESSION.

WHAT ARE THE PRIMARY NURSING GOALS IN A CARE PLAN FOR IMPAIRED VERBAL COMMUNICATION?

THE PRIMARY GOALS INCLUDE IMPROVING THE PATIENT'S ABILITY TO COMMUNICATE EFFECTIVELY, ENSURING SAFETY DURING COMMUNICATION, PROMOTING UNDERSTANDING BETWEEN PATIENT AND CAREGIVERS, AND SUPPORTING ALTERNATIVE COMMUNICATION METHODS IF NECESSARY.

WHAT NURSING INTERVENTIONS CAN BE INCLUDED IN A CARE PLAN FOR IMPAIRED VERBAL COMMUNICATION?

INTERVENTIONS MAY INCLUDE ASSESSING COMMUNICATION ABILITIES, USING SIMPLE LANGUAGE, PROVIDING VISUAL AIDS, ENCOURAGING ALTERNATIVE COMMUNICATION METHODS (LIKE GESTURES OR COMMUNICATION BOARDS), INVOLVING SPEECH THERAPISTS, AND ENSURING A QUIET ENVIRONMENT TO FACILITATE COMMUNICATION.

HOW CAN NURSES ASSESS IMPAIRED VERBAL COMMUNICATION IN PATIENTS?

NURSES CAN ASSESS BY OBSERVING THE PATIENT'S SPEECH CLARITY, COMPREHENSION, ABILITY TO EXPRESS NEEDS, USE OF ALTERNATIVE COMMUNICATION METHODS, AND BY USING STANDARDIZED COMMUNICATION ASSESSMENT TOOLS.

WHY IS IT IMPORTANT TO INVOLVE SPEECH-LANGUAGE PATHOLOGISTS IN THE CARE PLAN?

SPEECH-LANGUAGE PATHOLOGISTS SPECIALIZE IN DIAGNOSING AND TREATING COMMUNICATION DISORDERS AND CAN PROVIDE TARGETED THERAPY AND STRATEGIES TO IMPROVE THE PATIENT'S VERBAL COMMUNICATION ABILITIES.

HOW CAN FAMILY MEMBERS ASSIST IN MANAGING IMPAIRED VERBAL COMMUNICATION?

FAMILY MEMBERS CAN LEARN AND USE ALTERNATIVE COMMUNICATION TECHNIQUES, BE PATIENT LISTENERS, PROVIDE EMOTIONAL SUPPORT, AND COLLABORATE WITH HEALTHCARE PROVIDERS TO REINFORCE COMMUNICATION STRATEGIES.

WHAT ROLE DO ASSISTIVE DEVICES PLAY IN A CARE PLAN FOR IMPAIRED VERBAL COMMUNICATION?

ASSISTIVE DEVICES SUCH AS COMMUNICATION BOARDS, SPEECH-GENERATING DEVICES, OR APPS CAN HELP PATIENTS EXPRESS THEIR NEEDS AND PARTICIPATE MORE FULLY IN CARE AND SOCIAL INTERACTIONS.

HOW DO NURSES ENSURE EFFECTIVE COMMUNICATION WITH PATIENTS WHO HAVE IMPAIRED VERBAL COMMUNICATION?

NURSES ENSURE EFFECTIVENESS BY USING CLEAR, SIMPLE LANGUAGE, CONFIRMING UNDERSTANDING, BEING PATIENT, USING NONVERBAL CUES, AND ADAPTING COMMUNICATION METHODS TO THE PATIENT'S ABILITIES.

WHAT OUTCOMES INDICATE IMPROVEMENT IN A PATIENT WITH IMPAIRED VERBAL COMMUNICATION?

OUTCOMES INCLUDE INCREASED ABILITY TO EXPRESS NEEDS AND FEELINGS, IMPROVED COMPREHENSION OF SPOKEN LANGUAGE, EFFECTIVE USE OF ALTERNATIVE COMMUNICATION METHODS, AND GREATER PARTICIPATION IN CARE AND SOCIAL INTERACTIONS.

ADDITIONAL RESOURCES

1. EFFECTIVE CARE PLANNING FOR PATIENTS WITH IMPAIRED VERBAL COMMUNICATION

THIS BOOK OFFERS COMPREHENSIVE STRATEGIES FOR HEALTHCARE PROFESSIONALS TO DEVELOP PERSONALIZED CARE PLANS FOR PATIENTS WITH COMMUNICATION DIFFICULTIES. IT COVERS ASSESSMENT TECHNIQUES, GOAL SETTING, AND INTERVENTION METHODS TO ENHANCE PATIENT INTERACTION AND CARE OUTCOMES. THE TEXT ALSO INCLUDES CASE STUDIES AND PRACTICAL EXAMPLES TO GUIDE NURSES AND CAREGIVERS IN REAL-WORLD SCENARIOS.

2. COMMUNICATION DISORDERS AND NURSING INTERVENTIONS

FOCUSING ON NURSING CARE, THIS BOOK EXPLORES VARIOUS COMMUNICATION DISORDERS AND THEIR IMPACT ON PATIENT CARE. IT PROVIDES DETAILED CARE PLANS TAILORED TO PATIENTS WITH IMPAIRED VERBAL COMMUNICATION, EMPHASIZING EMPATHY AND PATIENT-CENTERED APPROACHES. THE BOOK IS A VALUABLE RESOURCE FOR UNDERSTANDING THE COMPLEXITIES OF COMMUNICATION BARRIERS IN CLINICAL SETTINGS.

- 3. Speech and Language Impairments: Nursing Approaches and Care Plans
 Designed for nursing students and professionals, this book delves into speech and language impairments, offering evidence-based care plans. It highlights techniques for improving patient communication and outlines
- EVIDENCE-BASED CARE PLANS. IT HIGHLIGHTS TECHNIQUES FOR IMPROVING PATIENT COMMUNICATION AND OUTLINES INTERVENTIONS TO SUPPORT VERBAL AND NON-VERBAL EXPRESSION. THE CONTENT SUPPORTS THE DEVELOPMENT OF HOLISTIC CARE STRATEGIES FOR DIVERSE PATIENT POPULATIONS.
- 4. Assessment and Management of Patients with Communication Challenges

This text provides a thorough overview of assessing patients who have impaired verbal communication abilities. It discusses diagnostic tools and management plans that facilitate effective communication in healthcare environments. The book also addresses interdisciplinary collaboration to optimize patient care and communication outcomes.

- 5. Care Planning for Adults with Aphasia and Related Communication Disorders

 Specializing in Aphasia and Similar conditions, this book offers targeted care plans designed to improve communication and quality of life for affected adults. It covers therapeutic interventions, caregiver support, and adaptive communication techniques. The guide is essential for clinicians working with stroke survivors and patients with neurological impairments.
- 6. Nonverbal Communication in Patient Care: Strategies and Care Plans
 This resource emphasizes the importance of nonverbal communication when verbal abilities are compromised. It provides care plans that incorporate gestures, facial expressions, and assistive technologies to enhance patient interaction. The book is an excellent tool for healthcare providers seeking to bridge communication gaps effectively.
- 7. INTERDISCIPLINARY APPROACHES TO CARING FOR PATIENTS WITH COMMUNICATION IMPAIRMENTS
 HIGHLIGHTING THE ROLES OF VARIOUS HEALTHCARE PROFESSIONALS, THIS BOOK PROMOTES COLLABORATIVE CARE PLANNING FOR PATIENTS WITH IMPAIRED VERBAL COMMUNICATION. IT DISCUSSES TEAMWORK, SHARED GOALS, AND INTEGRATED INTERVENTIONS TO IMPROVE PATIENT OUTCOMES. THE TEXT IS BENEFICIAL FOR FOSTERING A HOLISTIC AND COORDINATED APPROACH TO COMMUNICATION CARE.
- 8. PATIENT-CENTERED COMMUNICATION STRATEGIES IN NURSING CARE PLANS
 THIS BOOK CENTERS ON PATIENT-FOCUSED COMMUNICATION METHODS WITHIN NURSING CARE PLANS, ESPECIALLY FOR THOSE WITH VERBAL IMPAIRMENTS. IT EXPLORES TAILORED COMMUNICATION TECHNIQUES, CULTURAL SENSITIVITY, AND THE USE OF TECHNOLOGY TO SUPPORT PATIENT ENGAGEMENT. THE CONTENT IS DESIGNED TO ENHANCE NURSE-PATIENT RELATIONSHIPS AND CARE EFFECTIVENESS.
- 9. Rehabilitation Nursing and Communication Care Planning
 Focused on rehabilitation settings, this book outlines care planning strategies for patients recovering from conditions that affect speech and language. It integrates rehabilitation principles with communication support to facilitate patient independence and social reintegration. The text serves as a practical guide for rehabilitation nurses and therapists.

Impaired Verbal Communication Care Plan

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practice. Online Tutoring powered by Smarthinking--Free online tutoring, powered by Smarthinking, gives students access to expert nursing and allied health science educators whose mission, like yours, is to achieve success. Students can access live tutoring support, critiques of written work, and other valuable tools.

E-Book Gail B. Ladwig, Betty J. Ackley, 2013-01-31 This pocket-sized reference is ideal for use in clinicals, in class and at the bedside! A condensed version of the Nursing Diagnosis Handbook, 10th Edition, Mosby's Guide to Nursing Diagnosis, 4th edition uses a quick-access format to help you diagnose and formulate care plans with confidence and ease. It includes the most recent NANDA-I approved nursing diagnoses based on more than 1,300 specific symptoms and a step-by-step guide to creating care plans featuring desired outcomes, interventions, and patient teaching. UNIQUE! Care plans for every NANDA-I approved nursing diagnosis, including pediatric, geriatric, multicultural, home care, client/family teaching and discharge planning, and safety interventions Alphabetical thumb tabs provide quick access to specific symptoms and nursing diagnoses Pocketsize portability makes this book easy to carry and use in clinicals, in class, or at the bedside NEW! 4 Color Text NEW! Updated 2012-2014 NANDA-I-approved nursing diagnoses NEW! 16 new and 22 revised diagnoses NEW! Added content on safety, one of QSEN's six competencies

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research that supports the use of each intervention. Classic evidence-based references promote evidence-based interventions and rationales. Clear, concise interventions are usually only a sentence or two long and use no more than two references. Safety content emphasizes what must be considered to provide safe patient care. Step-by-step instructions show you how to use the Guide to Nursing Diagnoses and Guide to Planning Care sections to create a unique, individualized plan of care. List of Nursing Diagnosis Index in back inside cover of book for quick reference. Three-column index is easy to use. Easy-to-follow sections I and II guide you through the nursing process and selecting appropriate nursing diagnoses. Alphabetical thumb tabs allow quick access to specific symptoms and nursing diagnoses.

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NANDA-I nursing diagnoses, providing the building blocks for you to create your own individualized care plans for your own patients. 147 disorders and health promotion care plans cover virtually every common medical-surgical condition, organized by body system. Prioritized care planning guidance organizes care plans from actual to risk diagnoses, from general to specific interventions, and from independent to collaborative interventions. Nursing diagnosis care plans format includes a definition and explanation of the diagnosis, related factors, defining characteristics, expected outcomes, related NOC outcomes and NIC interventions, ongoing assessment, therapeutic interventions, and education/continuity of care. Disorders care plans format includes synonyms for the disorder (for easier cross referencing), an explanation of the diagnosis, common related factors, defining characteristics, expected outcomes, NOC outcomes and NIC interventions, ongoing assessment, and therapeutic interventions. Icons differentiate independent and collaborative nursing interventions. Student resources on the Evolve companion website include 36 of the book's care plans - 5 nursing diagnosis care plans and 31 disorders care plans. Three NEW nursing diagnosis care plans include Risk for Electrolyte Imbalance, Risk for Unstable Blood Glucose Level, and Risk for Bleeding. Six NEW health promotion/risk factor management care plans include Readiness for Engaging in a Regular Physical Activity Program, Readiness for Enhanced Nutrition, Readiness for Enhanced Sleep, Readiness for Smoking Cessation, Readiness for Managing Stress, and Readiness for Weight Management. Four NEW disorders care plans include Surgical Experience: Preoperative and Postoperative Care, Atrial Fibrillation, Bariatric Surgery, and Gastroenteritis. NEW Health Promotion and Risk Factor Management Care Plans chapter emphasizes the importance of preventive care and teaching for self-management. NEW Basic Nursing Concepts Care Plans chapter focuses on concepts that apply to disorders found in multiple body systems. UPDATED care plans ensure consistency with the latest U.S. National Patient Safety Goals and other evidence-based national treatment guidelines. The latest NANDA-I taxonomy keeps you current with 2012-2014 NANDA-I nursing diagnoses, related factors, and defining characteristics. Enhanced rationales include explanations for nursing interventions to help you better understand what the nurse does and why.

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