

CORRECTIVE ASSIGNMENTS

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NARAYANA COLLEGE OF NURSING
 CHINTHAREDDY PALEM: NELLORE
 MEDICAL SURGICAL NURSING
 II BSc NURSING

BSc/MSN/26

CHECKLIST FOR CARE OF INTERCOSTAL DRAINAGE

STUDENT NAME: SANDRA MOL P-S

WARD
 DATE:

: GENERAL SURGERY
 : 08/10/2024

SNO.	CRITERIA	5	4	3	2	1
21.	PRE PROCEDURE Check for 3 c's		/			
22.	Explain the procedure to the patient		/	/		
23.	Assemble the articles at bed side			/		
24.	Obtain informed consent from the patient		/			
25.	Perform hand hygiene			/		
26.	PROCEDURE: Assess the surgeon with insertion of chest tubes		/		/	
27.	Connect the chest tubes in water seal drainage					
28.	Assess the client for respiratory distress and chest pain		/	/	/	
29.	Observe the following Chest tube dressing Tubing for kinks, dependent loops		/			
30.	Chest drainage system should be upright and below the level of tube insertion			/		
31.	Observe for Water seal for fluctuations with the patients inspirations and exertions		/		/	
32.	Observe for Bubbling in water seal bottle or chamber			/		
33.	Record color and amount of drainage and follow up, care after the initial connection		/			
34.	Ensure drainage tube in water seal 2.5 cm below the water level			/		
35.	Establish original level of fluid by marking with pen or tape, filling to a present amount		/			
36.	Ensure the two tubing's ,clamps are always at the patient's bedside				/	
37.	Maintain high fowlers or medium fowler's position		/			
38.	Maintain all connections between the chest and drainage tubes intact and taped.				/	
39.	AFTER PROCEDURE: Perform hand washing every time handling the tubes		/		/	
40.	Recording and reporting	/				
TOTAL						22

SIGNATURE OF THE STUDENT *Sandra*

SIGNATURE OF THE EVALUATOR

REMARKS

Good and add innovative techniques on intercostal drainage

N. Mary

Dr. B. Anj
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ASSIGNMENT ON CARE OF INTERCOSTAL DRAINAGE

Submitted to,
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Submitted by,
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INTRODUCTION

A chest drain is a tube inserted through the chest wall b/w the ribs and into the pleural cavity to allow drainage of air, blood fluids or puss out of the chest.

It allows draining of the pleural contents and re expansion of the lungs.

DEFINITION

Intercostal drainage is the drainage of fluid (air/ blood and puss discharges from the pleural space through intercostal space.

INDICATION

- Pneumothorax
- Hemothorax.
- empyema
- malignant pleural effusion
- Pleurodesis.

CONTRAINDICATION

- several pleural adhesions
- Incorrected.
- Diaphragmatic hernia.

POSITION

- sitting position
- lateral decubitus position
- localized pathology

EQUIPMENTS

- Sterile gloves
- gowns
- Antiseptic solution
- Sterile sponges
- Gauze swabs
- Syringes
- Local anesthetic
- Blade.
- Curved clamp
- Guidance with dilators
- chest tube
- Connecting tube
- closed drainage system
- Dressing materials.

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CHEST TUBE TYPES

- Thoracostomy chest tube
- Thurn chest tube
- valve catheter
- Guidance type chest drain.

NURSING CARE

- Encourage deep breaths and cough
- adequate pain relief
- Encourage movement
- Assess water level tidaliens
- Avoid milking and clamping
- Ensure collection unit below the level of chest
- Suction can improve the speed of air and fluid removal

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CONCLUSION

A chest drain is a tube inserted through the chest wall below the ribs and into the pleural cavity to allow drainage of air, blood, fluid or pus out of the chest.

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MEDICAL SURGICAL NURSING

BSc/MSN/3

II B.Sc (N)

CHECKLIST FOR INTRAVENOUS DRUG ADMINISTRATION

STUDENT NAME: SANDRA MOL P.S

DATE: 02/08/2023

WARD : GENERAL MEDICINE

Sl.No	ITEMS	5	4	3	2	1
1.	BEFORE PROCEDURE: <i>First Check:</i> Checks medication order on Medication Administration Record against physician's order (patient name, identification number, medication, dose, route, time, and allergies) Check physician order.		✓			
2.	<i>Second Check:</i> When preparing medication, verifies correct medication, dose, time, route, and expiration date.		✓			
3.	<i>Third Check:</i> At the bedside, verifies correct patient (using two methods of identification, including armband), medication, expiration date, dose, route, time, and presence of drug allergies.	✓				
4.	Follow the Ten rights of drug administration		✓			
5.	Assess for any contraindications to client receiving medications (NPO, hypotension, heart rate, allergies, labs, etc.)			✓		
6.	DURING PROCEDURE Wash the hands		✓			
* 7.	Reassure the patient and explain the procedure to the patient			✓		
8.	Uncover arm completely			✓		
9.	Have the patient relax and support his arm below the vein to be used.		✓			
10.	Apply tourniquet and look for a suitable vein.			✓		
11.	Wait for the vein to swell.	✓				
12.	Disinfect skin with alcohol swab			✓		
13.	Stabilize the vein by pulling the skin taut in the longitudinal direction of the vein. Do this with the hand you are not going to use for inserting the needle.	✓				
14.	Insert the needle at an angle of around 35 degrees.			✓		
15.	Puncture the skin and move the needle slightly into the vein (3-5 mm)		✓			
16.	Hold the syringe and needle steady	✓				
17.	Aspirate. If blood appears hold the syringe steady, you are in the vein. If it does not come, try again		✓			
18.	Loosen tourniquet.			✓		
19.	Inject (very) slowly. Check for pain, swelling, hematoma; if in doubt whether you are still in the vein aspirate again!		✓			
* 20.	Withdraw needle swiftly. Press sterile cotton wool onto the opening. Secure with adhesive tape.	✓				

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21	Check the patient's reactions and give additional reassurance, if necessary	✓				
22	AFTER PROCEDURE Replace all the article		✓			
23	Dispose of waste safely	✓				
24	Wash the hands		✓			
25	Recording and Reporting			✓		

SIGNATURE OF THE STUDENT *Beth*

SIGNATURE OF THE EVALUATOR *N. Mary*

REMARKS: *Lack of contents*
— Include procedure & patient preparation, as per manual

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ASSIGNMENT ON INTRAVENOUS DRUG ADMINISTRATION

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INTRODUCTION

Some medications must be given by an intravenous or injection or infusion. This means they're sent directly into your vein using a needle or tube. In fact the term "intravenous" means into the ven.

with IV administration, a thin plastic tube called an IV catheter is inserted into your vein. The catheter allows your healthcare professionals to give you multiple safe doses of medication without needing to poke you with a needle each time.

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Principai

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DEFINITION

Intravenous Medication administration refers to the process of giving medication directly into a patient's vein. Methods of administering IV medication by rapid injection into the vein using a syringe, giving the medication intermittently over a specific amount of time using an IV secondary line.

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PURPOSE

- * The primary purpose of giving IV medications is to initiate a rapid systemic response to medication.
- * It is one of the fastest way of delivering medication.
- * The drug is immediately available to the body. It is easier to control the actual amount of drug delivered to the body by using the IV method.

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PRECAUTIONS

- Proper IV administration should follow the five rights of medication administration to avoid medication errors:
- The IV line must be intact before any IV medication can be administered.
- Some IV push medications must be diluted before injection.
- The drug delivery rate is an important factor when administering IV medication.
- The effects of medication appear rapidly after an IV injection.

PREPARATION

- The patient is placed in a comfortable position.
- The procedure should be explained and the patient is told the name of the drug to be administered.
- The patency of the IV line is checked to insure that the line is checked to intact and not to leaking.
- Check the physician's order correctly.
- The label of the medication should be checked and to be sure that it is not outdated.
- The health care professionals determine the amount of time over which the drug should be delivered according to the physician's order or the IV drug administration guidelines.

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COMPLICATIONS

- Infiltration of the IV line when a drug is injected IV bolus
- Tissue necrosis when drug are injected into infiltrated IV sites.
- thrombophlebitis of the vein
- Injection of air embolism
- serious adverse drug reactions such as hypotension, cardiac arrhythmias, and cardiac arrest
- Allergic reaction to the medication
- venous thrombosis
- pain at the IV site

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CONCLUSION

When administered according to the physician's orders, following drug administration guidelines, and using the correct techniques and W apparatus, W medications can have immediate positive therapeutic effects. The effects of the medication will vary depending upon the type of medication given.

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