DIAGNOSIS	GOALS	INTERVENTIONS	EVALUATION
NON-INDEPENDENCE: PSYCHOMOTOR SKILL PERFORMANCE r/t being an "advanced beginner" in nursing AEB limited experience in procedures, dressing changes, catherizations, chest tubes, and IV medication administration.	<ul> <li>STG: WEEK ONE:</li> <li>Perform all procedures with supervision of preceptor.</li> <li>STG: WEEK TWO:</li> <li>Progressively perform all patient procedures with increasing independence.</li> <li>LTG: WEEK FOUR</li> <li>Perform all procedures independently with minimum or no assistance from preceptor.</li> </ul>	<ul> <li>Complete Skills Checklist to determine areas of greatest need; review with preceptor.</li> <li>Reread any procedures that are unfamiliar in skills textbook and De Anza's skills packet.</li> <li>Ask other staff nurses to allow me to perform procedures on their patients with preceptor's assistance.</li> <li>Review rationales and reasons for treatments.</li> <li>Review hospital policies and procedures of commonly performed skills for this unit.</li> </ul>	

DIAGNOSIS	GOALS	INTERVENTIONS	EVALUATION
INSUFFICIENT PHARMACOLOGICAL KNOWLEDGE	STG: will develop a list of the most common drugs given by the end of the first week.  STG: Develop a list of medication prescriptions for each patient.  LTG: by the end of the fourth week, I will be able to correlate patient care RT medications administered and signs and symptoms of side effects. I will also be able to teach patients about the medications they are taking.	<ul> <li>Make a list of the most commonly prescribed drugs used, includes common dosage, action, action, classification, and side effects.</li> <li>Look up all medications I've never administered before administering to patient.</li> <li>Have preceptor quiz me regarding side effects and action of drugs.</li> <li>Before teaching patients about the drugs they are taking, use preceptor as a "patient" to go over information.</li> </ul>	

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POTENTIAL FOR IMPROVED LAB FINDING INTERPRETATIONS AND CORRECT ACTION.	STG: by the end of the 2 <sup>nd</sup> week:  • Will know the normal values for the most common lab tests.  LTG: by the fourth week:  • Will be able to examine lab results and identify potential/actual decline or improvement in patient condition.	<ul> <li>Make a sheet with common normal lab values and causes of abnormal findings.</li> <li>Study sheet every day.</li> <li>At the beginning of each shift, look up each patient's lab values in the computer.</li> <li>Discuss each patient's lab values with preceptor.</li> <li>Have preceptor ask me what I would do in real or hypothetical situations RT lab findings.</li> </ul>	EVALUATION

DIAGNOSIS	GOALS	INTERVENTIONS	EVALUATION
Potential for Development of Managerial/Leadership Skills	<ul> <li>Admit a patient and generate a patient care based on the admission data.</li> <li>Discharge a patient with all appropriate teaching, family involvement considerations, and referrals utilizing other health team members and community resources.</li> <li>STG: THIRD WEEK: <ul> <li>Attend a patient care conference and, if possible, participate. Conference should be on one of my own patient's if possible.</li> <li>Conduct a patient care conference with assistance of preceptor.</li> </ul> </li> <li>LTG: FOURTH WEEK: <ul> <li>Perform some team leadership responsibilities.</li> </ul> </li> </ul>	<ul> <li>Spend one day with charge nurse in the first and fourth weeks.</li> <li>Admit a patient with preceptor's assistance.</li> <li>Develop a new care plan for patient discussing diagnosis and plans with preceptor.</li> <li>Discharge patient and perform final patient teaching considering family and patient needs, community resources, etc.</li> <li>Attend a patient care conference preferably on one of my own patient's. OR</li> <li>Conduct and plan a patient care plan conference with assistance of preceptor.</li> <li>Write a plan for nursing coverage for patients on unit for one shift.</li> <li>Learn how hospital determines acuities.</li> <li>Describe actions that you take as a team leader in order to obtain information TR quality of patient care.</li> <li>Assess and evaluate functioning and skills of team members.</li> </ul>	

DIAGNOSIS	GOALS	INTERVENTIONS	EVALUATION
LACK OF ASSERTIVENESS (especially with more experienced staff members); RT delegation/assignment of tasks, dealing with an aggressive or uncooperative patient, communicating knowledgeably and effectively with physician.	<ul> <li>WEEK ONE:</li> <li>Begin to assign/delegate tasks (e.g., a.m. care) to other staff with confidence.</li> <li>WEEK TWO:</li> <li>Communicate with physician RT: patient assessment, questioning of med orders, etc., with preceptor.</li> <li>WEEK THREE and FOUR</li> <li>Discuss patient care, procedures, meds, etc., confidently with physician</li> <li>Interact with variety of patients with confidence.</li> <li>Delegate and assign tasks independently.</li> <li>Be able to determine when delegation is appropriate (e.g., according to my time schedule, depending on patient acuity, skill level of delegate, etc.)</li> </ul>	<ul> <li>Obtain feedback from preceptor concerning when assignment/delegation is appropriate and which tasks are appropriate.</li> <li>Review techniques of communication and confrontation.</li> <li>Practice communication techniques to use with patients and physician with my preceptor.</li> </ul>	