Managing Time

It is 0700 and the charge nurse, Brenda, RN, approaches a staff nurse, George, RN, to give report about the patients George will be assigned today. George will have the assistance of one LPN and one UAP.

Patient A: A new admission coming from ICU. This 72-year-old man was admitted 3 days ago in severe heart failure. Nothing else is known at this time. The ICU nurse will give report on transfer, which should be at 0900. The room has not been set up.

Patient B: A 68-year-old woman with Type II Diabetes Mellitus who should be discharged today. She needs discharge teaching on dressing changes for a leg ulcer. She has asked that someone help her get her hair washed before she is discharged today.

Patient C: A 20-year-old woman with Type I Diabetes Mellitus who needs her insulin drip changed at 0730. Her diet must be changed to 1800 calorie this morning and her caloric intake must be evaluated so that her insulin drip can be discontinued. She will begin blood glucose monitoring for sliding scale insulin every 6 hours.

Patient D: A 56-year-old woman who was admitted at 0530 complaining of heartburn and nausea for the last 2 days. She called out to the nurses’ station 15 minutes ago complaining of increasing nausea and diaphoresis.

Patient E: A 90-year-old man admitted with pneumonia. He has received 2 doses of IV antibiotics and has an oxygen saturation of 92%. He is agitated because he needs help to get to the bathroom.

After report, a visitor approaches George to report that the toilet is backed up in the waiting room. The unit secretary taps George on the shoulder to say that Dr. Jones is asking for a nurse to make rounds on all 12 of the doctor’s patients on the unit.

Questions:
1. What are some time management strategies George could implement to be certain he meets his patients’ needs?
2. How should George prioritize his patient care assignment? What is the order in which he should assess his assigned patients? Give rationales.
3. What could George delegate to the UAP and LPN?