20.11: Chapter 11 (Comfort)

Answer Key to Chapter 11 Learning Activities

Patient Scenario Colon Cancer & Pain Management

1. What additional assessments (subjective and objective) will you perform on Joe?

Additional assessments include a full respiratory, abdominal, and pain assessment. It is important to include Joe’s subjective statements related to these systems, as well as observable findings. It would be important to collect information related to lung sounds, observed breathing effort, color of sputum, reports of shortness of breath, etc. Additionally, the patient should be assessed for guarding, grimace, self-report of pain, etc. The patient may not be getting out of bed and ambulating due to pain, but the lack of ambulation is causing additional problems for the patient. With the colon resection and lack of ambulation, it would also be important to determine the patient’s bowel function. Abdominal sounds, ability to pass flatus, last bowel movement, signs of nausea, etc., are all important for determining bowel motility.

2. List the top three priority nursing diagnoses for Joe.

Potential priority diagnoses for Joe might include the following:

- Ineffective Breathing Pattern
- Acute Pain
- Impaired Mobility
- Activity Intolerance
- Constipation
3. Joe states, “I don’t want to use morphine. I am afraid I will become addicted to it like my friend did after he came home from the war.” How will you respond to therapeutically address his concerns, yet also teach Joe about good pain management?

It would be important to dispel myths for the patient regarding pain management and addiction. Joe should receive education that the use of opioids is appropriate for the treatment of acute surgical pain in the short-term. He should receive instruction that by omitting the use of pain medications, his pain response has led to decreased mobility, which is causing respiratory complications for him.

4. What are common side effects of opioids and how will you plan to manage these side effects for Joe?

Common side effects of opioids are decreased respiratory rate, decreased bowel motility, increased lethargy, etc. Of significant concern for Joe is the potential impact of the opioid on his bowel function. The surgical intervention and lack of mobility have already placed him at risk for constipation. It will be important for the patient to resume a sufficient bowel regimen with adequate fluids, ambulation, stool softeners, high fiber foods, and laxatives if needed.

5. Emotional issues could also be affecting Joe’s perception of pain. What will you further physically assess and therapeutically address?

With Joe’s diagnosis of colon cancer, there can be many personal coping challenges that the patient is experiencing. It is important to encourage Joe to verbalize his feelings related to his diagnosis and understand what resources might best help facilitate his individual coping.

6. After providing patient education about morphine and the PCA pump, you check on Joe later in the day and notice he has had five injections and 15 attempts in the past hour. What further assessments will you perform?

It will be important to assess the insertion site where the pain medication is infusing to be certain that the tubing is not kinked and that the medication is actually reaching the patient. Additionally, Joe should receive education about use of the pump and guidelines regarding self-administration to ensure he understands the administration parameters appropriately. He should also have a thorough pain assessment completed, and the nurse should collect information to report to the prescribing physician regarding the use of medication and patient response.

Answers to interactive elements are given within the interactive element.