

SN Name _____

Date of Care _____

Critical Thinking Worksheet

Instructions:

1. Document basic assessment
2. Document comprehensive assessment
3. Write the rationale **for performing the assessment**. *Think: I did this assessment because _____.* (I do NOT want what the assessment will reveal!)
4. Nursing Diagnosis (3 part)
5. Modify plan of care by synthesizing data, predicting possible outcomes, & setting goals. **MUST** have a patient **OUTCOME**, and a plan to help the patient reach it. Include interdisciplinary collaboration.

AIR (respiratory)

- 1.
- 2.
- 3.
- 4.
- 5.

WATER/FOOD (cardiovascular)

- 1.
- 2.
- 3.
- 4.
- 5.

ACTIVITY & REST

- 1.
- 2.
- 3.
- 4.
- 5.

ELIMINATION

- 1.
- 2.
- 3.
- 4.
- 5.

SOLITUDE & SOCIAL INTERACTIONS

- 1.
- 2.
- 3.
- 4.
- 5.

NORMALCY

- 1.
- 2.
- 3.
- 4.
- 5.

PREVENTION OF HAZARDS

- 1.
- 2.
- 3.
- 4.
- 5.

DEVELOPMENTAL SELF-CARE REQUISITES

- 1.
- 2.
- 3.
- 4.
- 5.

HEALTH DEVIATION SELF CARE REQUISITES

- 1.
- 2.
- 3.
- 4.
- 5.