OHSU Health Care System - Patient Care Services

NPEOC: Liver Transplant

Effective Date: May 01, 2008
No: HC-PCS-AAC-S007

NURSING PRACTICE EXPECTATIONS OF CARE:

(formerly 33soc)

STANDARD 1:
Assessment and Diagnosis - The nurse collects relevant health data and analyzes the data to determine diagnoses.

Assessment:

1. Assess per Adult Inpatient Standard of Care, Postoperative Standard of Care and as listed below:
   A. Hemodynamic status and VS q 4 H for entire hospital stay.
   B. Urine output q 4 H x 48 hours. Strict I&O for entire hospital stay.
   C. Pulmonary, O2 sat q 4 H
   D. Daily weight by 7am (prior to physician rounds).
2. Monitor for s/s of rejection
   A. Rise in liver function tests
   B. Graft tenderness
   C. Fever

Labs/Diagnostics:

1. Monitor labs:
   A. Liver function tests, amylase, albumin, glucose
   B. Platelets and Hct for indications of bleeding (may need transfusion if platelets >20,000)
   C. PT, PTT, INR
   D. Cyclosporine or FK506 level
   E. WBC for changes (i.e., <3000 or >10,000) indicating need in adjustment of immunosuppressant medications
   F. Electrolytes and possible need for replacement/restriction.

   Note: Low sodium may require need for restriction of free water and/or fluids.

G. Persistent elevated glucose (> 200) indicating steroid induced diabetes and possible need for medication adjustment and diabetes education consult

STANDARD 2:
Outcome Identification - The nurse identifies individualized expected outcomes for the patient.

Expected Outcomes:

1. Patient demonstrates success in setting up 1 week of medications according to prescription.
2. Patient demonstrates skill in self-administration of oral and injectable medications.
3. Understands purpose of medication regimen, side effects, and lab values that influence dosing.
4. Verbalizes understanding of follow-up schedule for lab tests and appointments.

STANDARD 3:
Develop and Implement Plan of Care - The nurse develops and implements a plan of care to assist the patient in achieving expected outcomes.

Procedures/Treatments:

1. Nothing by rectum unless specifically ordered because of risk of micro tears
2. JP care

3/16/2011 Policy: NPEOC: Liver Transplant

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A. Strip q 4 H x 48 hours
B. Monitor output and need for dressing change
C. Notify physician if after first 24 hours, JP output for 8 hours is greater than 150.

3. Guaiac all stools.
4. Obtain CBG q.i.d. before meals and at bedtime for serum glucose >200.

Nutrition/IVs:

1. IV fluids per preprinted orders.
2. Use special blood filter connected to piggy back tubing and no saline when transfusing blood.

Note: Saline is omitted when transfusing blood because of tendency for fluid overload.
3. Initiate nutrition referral.

Medications:

1. Monitor for side effects of immunosuppressant, antiinfective, and anti-rejection drugs. (Attachment 1: Liver Transplant Medications)
2. Administer transplant medications per requirements. (Attachment 1: Liver Transplant Medications).
3. JP Drain Tube Patient Information

Teaching/Discharge planning:

1. Coordinate discharge planning with Care Management - Patient needs to reside within 1-1/2 hours driving time from OHSU at time of discharge. Housing needs to be arranged if patient lives farther away.
2. Coordinate discharge teaching with transplant coordinator and pharmacist:
   A. Reinforce self-medication teaching provided by pharmacist.
   B. Have patient set up pill box with discharge medications according to time of day meds to be taken for 1 week.
   C. Reinforce teaching provided by transplant coordinator about follow-up care after discharge.
   D. Review medication profile card with patient and check meds for accuracy prior to patient self administration.
3. For patients being discharged with a wound drain, provide self-care instructions and supplies (For drain - specimen cup for measuring output; split 2x2s for dressing).
4. For patient being discharged on insulin, teach and have patient demonstrate sub q self injection.

STANDARD 4:

Evaluation - The nurse evaluates the patient's progress toward attaining expected outcomes and revises the plan of care accordingly.

Bibliography:


Related Forms:
- Patient Information: Care for your Drain at Home
- Standards of Nursing Care: Post-op Acute Care Adult Inpatients
- Attachment 1: Liver Transplant Medications

Supersedes:

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