Teaching plan

Business



The Identified Learning Need Patients with Diabetes have very comprehensive learning needs. The learning needs arefocused on managing their glucose levels and preventing complications of diabetes. Learningneeds for managing diabetes are complex and include: monitoring blood glucose levels, menu/food planning, exercise, medications, skin care, management of co-existing disease processes, knowledge of medications, knowledge of the disease process and how to managehypo or hyperglycemic episodes. Many patients are diagnosed with diabetes every year andmany are unaware that it requires lifestyle changes, especially in the areas of nutrition and physical activity. Making these lifestyle changes is one of the greatest challenges they willencounter in managing their diabetes.

The main goal of the teaching plan is to provide the patientwith the knowledge to be able to make self-directed behavioral changes to improve their overallhealth and manage their diabetes. The Behavioral Objectives for the Teaching Plan 1. The patient will be able to describe the diabetic medications that they are on and how to properly take the medications2. The patient will be able to demonstrate proper skin and foot care. 3.

The patient will be able to perform self-monitoring of blood glucose using a bloodglucose meter as evidenced by demonstration of the technique to the nurse or nurse practitioner. 4. The patient will be able to describe the benefits of regular exercise and how regular exercise can improve blood glucose control. Teaching PlanThe diabetes teaching plan is aimed at helping the patient make educated lifestyle choicesand changes that will promote health and promote a stable blood sugar. Each patient needs acomprehensive treatment approach.

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This includes: (a) an individualized food/meal planappropriate for his/her lifestyle, (b) education related to diabetes and nutrition therapy, and (c)mutually agreed-upon short term and long term goals for lifestyle changes. The teaching plan should stress the importance of complying with the prescribedtreatment program. This teaching plan should be tailored to the patient's needs, abilities, anddevelopmental stage. The teaching plan for a patient with diabetes should include: diet, administration, possible adverse effects of medication, exercise, blood glucose monitoring, hygiene, and the prevention and recognition of hypoglycemia and hyperglycemia. The teaching plan is an education program designed to help patients with newly diagnosed diabetes or patientswho need a review of concepts for managing their diabetes. However, diabetes managementrequires on-going education and nutritional advice with regular review and modification as thedisease process progresses and the needs of the patient changes.

Teaching Plan for DiabetesTeaching Plan would include 6 evening or day classes consisting of 2-3 hour sessions 1 Teaching Plan for Newly Diagnosed Diabetes of education and group discussion. The topics and discussions would be as follows. Day 1 o General overview of Diabetes (2 hours)Day 2 o Blood glucose monitoring and goals of blood glucosemonitoring (3 hours)Day 3 o Medications and Insulin (2 – 3 hours)Day 4 o Complications from Diabetes (1 hour) o Skin and Foot Care (0. 5 hour) o Exercise and Diabetes (1. 5 hour)Day 5 o Diet and Diabetes (2 hours) oCoping with Diabetes (1 hour)Day 6 o Questions and Answers (1 hour) o Review of any concepts requested by patients (1 hour)General Overview of Diabetes Patients with diabetes need to understand what diabetes is.

Patients who understand whatdiabetes is and the complicated process associated with the disease are more likely to complywith the prescribed regimen. Diabetes Mellitus is a syndrome with disordered metabolism andinappropriate hyperglycemia due to either a deficiency of insulin secretion or to a combination of insulin resistance and inadequate insulin secretion to compensate. Diabetes is a chronic progressive disease that requires lifestyle changes, especially in the areas of nutrition and physical activity. The overall goal of medical and nutritional therapy is to assist persons withdiabetes in making self-directed behavioral changes that will improve their overall health. Blood glucose monitoring and goals of blood glucose monitoring: Testing blood glucose levels pre-meal and post-meal can help the patient with diabetesmake better food choices, based on how their bodies are responding to specific foods.

Patients2Teaching Plan for Newly Diagnosed Diabetesshould be taught specific directions for obtaining an adequate blood sample and what to do withthe numbers that they receive. Research has found that patients who have had education on theuse of their meters and how to interpret the data are more likely to perform self-blood glucosemonitoring on a regular basisThere are many different glucose monitors available for patients. The patient needs tohave a device that is easy for them to use and convenient. A patient's visual acuity and dexterityskills should be assessed prior to selecting a blood glucose-monitoring device. The patient needs to be reminded to record the blood glucose values on a log sheet with the date and time and anyassociated signs and symptoms that he/she is experiencing at the time the specimen wasobtained. This log should be shared with his/her primary care practitioner.

A discussion of glycosylated hemoglobin (HbA1c) should include the reasons for doingthe test, how it is performed and how the health care practitioner will interpret the data. Theselaboratory tests are ordered on a routine basis along with other laboratory tests that are beingmonitored for the patient. A simple method to describe the HbA1c is to tell the patient that thetest measures the amount of sugar that attaches to the protein in the red blood cell. The testshows the average blood sugar during the last three months. The higher the blood sugar thehigher the HbA1c. The high blood sugar over a long period of time causes damage to the largeand small blood vessels therefore increasing the risk of complications from diabetes.

Medications and Insulin The patient with diabetes needs to be reminded that the addition of medications to helpmanage his/her diabetes is not because they are failing at diet management. Many patients withdiabetes become depressed or despondent when they have to begin taking oral hyperglycemicmedications and/or insulin. The teaching session should include a review of the different types of oral diabetic agents. A review of the different types of insulins and how to mix insulins shouldalso be discussed. Teach the patient about self-administration of insulin or oral agents as prescribed, and the importance of taking medications exactly as prescribed, in the appropriatedose.

Patients should be provided with a list of signs and symptoms of hypoglycemia and hyperglycemia and actions to take in each situation.

Complications from Diabetes The patient should be taught how to manage their diabetes when he/she has a minor illness, such as a cold, flu or gastrointestinal virus. The patient should also be taught how towatch for diabetic effects on the cardiovascular system, such as cerebrovascular incidents/stroke, coronary artery disease, and peripheral vascular disease. Assessment for signs of diabeticneuropathy should also be included in the teaching plan. Patients with diabetes should alsoreceive education on the importance of smoking cessation, cholesterol and lipid management, blood pressure monitoring and management and management of other disease processes.

Skin and Foot Care Teach the patient to care for his feet by washing them daily, drying them carefully particularly between the toes, and inspecting for corns, calluses, redness, swelling, bruises, blisters, and breaks in the skin. The patient should be encouraged to report any changes to his/her health care provider as soon as possible. Advise the patient to wear nonconstricting shoes and to3