

## Health Promotion Activities Plan

**\*\*This sample is to assist you in developing a health promotion activity plan. It is not intended to replace medical advice. Any instructions given by the physician regarding this diagnosis must be included.**

Name of Individual:

Health Concern/Issue * (Diagnosis)	<b>MENSTRUATION DISORDERS</b>
Related Body System	Vision      Respiratory      Lymphatic      Dental      Hearing      Digestive      Integumentary (Skin)      Endocrine      Cardiovascular Nervous      Musculoskeletal <b>Genitourinary</b> Blood
What is it? (Provide definition)	On average, flow occurs every 28 days and lasts about 4 days but there can be a wide variation in timing and duration that is still considered normal. Menorrhagia - menstrual periods are heavy, prolonged, or irregular. Endometriosis - the tissue that normally lines the uterus (endometrium) grows on other areas of the body causing pain and irregular bleeding. Dysmenorrhea - painful periods or menstrual cramping; when period is accompanied by either sharp, intermittent pain or dull, aching pain, usually in the pelvis or lower abdomen.
Signs and Symptoms (general)	Soaking through sanitary pad or tampon every hour for 6 consecutive hours is considered very heavy period. Prolonged period is one that lasts longer than 7 days. Irregular periods happen more often than every 21 days or less often than every 35 days. Bleeding, pain or discharge between periods might be a sign of a problem or periods have been heavy or prolonged for 3 or more cycles, compared to what is normal for this particular individual.
Signs and Symptoms (specific to the person)	
Promotion/strategy support required * List very specific steps that the individual and/or caregivers use to support the person's health condition. Include information about monitoring health status. Who is called for changes/ problems in this person's health condition? What is tracked, where it can be found, and who follows up on documentation required for this health condition? Who provides what training for the person and staff about the health condition and when?	<ul style="list-style-type: none"> <li>➤ Watch <u>(name of person)</u> for signs and symptoms listed above and report to <u>(title of person in agency who is responsible to receive this information)</u>.</li> <li>➤ Give medication as ordered (see Medication Administration Record/Log). If a prn (as needed) medication is given, the result must be documented per agency policy.</li> <li>➤ <u>Include any specific instructions from the treating physician.</u> For example, comfort measures</li> <li>➤ Record days of menstruation on a chart indicating flow, pain, etc.</li> <li>➤ Documentation about this condition can be found in the medical record under <u>(list section here)</u>.</li> <li>➤ Receive training regarding this diagnosis and plan of care (include when to notify the physician) by <u>(title of person who provides medical training)</u> at least <u>(indicate frequency of training)</u> or as changes occur. This should be documented for all staff in the home</li> </ul>
Frequency of support *	<i>Fill in what physician (e.g. primary care physician, gynecologist) treats this condition and how often the person is seen.</i>
Desired outcome *	To recognize symptoms as soon as possible to obtain treatment.
Person/agency responsible *	<u>(Name of person)</u> , caregivers, agency nurse, primary care physician, <u>(specialist, if applicable)</u> <i>(The responsible parties may vary according to your agency; please place specific roles in this section. Some other examples might be health care coordinator, program specialist, house manager.)</i>

\* FIELDS FOUND IN THE HEALTH PROMOTION SECTION OF THE ISP