

**Gallbladder Risk Plan**

**Participant’s Name:**

**Date plan Begins:**

**Date Plan Expires:**

**Dates of Revisions:**

**Written by:**

**Risk:**       is at risk of experiencing digestive issues.

**Desired Outcome:**       will eat a healthy, balanced, low fat diet and avoid that trigger digestive issues. Staff will respond as trained if symptoms of digestive issues are exhibited.

**History:**

The **gallbladder** is a small pouch that sits just under the liver and stores bile. Bile is a bitter greenish-brown alkaline fluid that aids digestion, that is produced by the liver. Before meals, the gallbladder may be full of bile and about the size of a small pear. During and after meals, the bile is excreted into the small intestine and the gallbladder is empty and flat, like a deflated balloon. If a person has gallstones, infection, inflammation, or polyps and has a cholecystectomy or gallbladder removal, there is no place to store bile, therefore, not as much is in the small intestine to aid with digestion. This may cause changes to the digestive routine, such as, more frequent bowel movements or upset stomach after a high fat meal.

**Supports and interventions:**

*
*
*
* Staff will encourage      , as needed, to eat a balanced, high fiber, low fat diet and avoid foods that trigger digestive issues.
* Staff will encourage      , as needed, to eat frequent, small meals throughout the day.

**Monitor:**

* Food intolerance
* Nausea or upset stomach
* Abdominal cramping, or bloating
* Gas (flatulence)
* Diarrhea
* Changes in frequency of bowel movements

**Notify:**

* **Call 911 if emergency intervention was necessary, such as, back blows, abdominal thrusts, CPR, etc., exhibiting multiple or severe symptoms, if more than first aid is needed for injuries, if they hit their head, any type of reaction that interferes with the ability to breathe or swallow, rapidly worsening symptoms, or loss of consciousness.**
* Notify Program Manager, Health and Safety Tech and/or Nurse of any symptoms of digestive issues, change of condition, or concerns.
* Program Manager will notify family, guardian, other Program Managers, and/or Providers of any symptoms of digestive issues, change of conditions, or concerns.
* Staff will document on incident report by end of shift.

 **If 911 is called:**

* Remain with       until EMTs arrive. If emergency intervention was necessary, continue as trained until relieved by EMTs.
* Ensure that emergency personnel are aware of all medical conditions, allergies, and medications.
* Follow       to the hospital and remain with participant until relieved by staff or family.
* Complete an incident report by end of shift and BDDS report within 24 hours.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Provider** |  | **Risk Plan** |  |  | **Date Effective** |
| **Paladin** | **Gallbladder** |  |
| **Print Name** | **Signature** | **Company/Title** | **Date** |
|  |  | **Paladin/Program Manager** |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |