

Assessment of the Child/Family Structures/Socioeconomic Issues

I. Communicating with Children

- Talk to parent and child
- Use play to help child feel more comfortable
- Get down to eye level with child
- Be honest

II. Assessment of the Child

A). General Survey

- Establish relationship with child and family-gain trust
- Use open ended questions
- Looking at interaction between child and family
- Looking at child's general appearance
- Are they developmentally appropriate?

B). Health History

- Family hx, Past Medical History of child
- Immunization status
- Exposure to recent illness/sick siblings/school

C). Physical Exam

- Chaperone and/or parent present

D). Assess Growth Measurements

- Length-for children up to 24 months old
- Height-stand upright with shoes off when able to stand safely on own
- Weight-exact for all children. No exceptions, no estimates. Kilograms
- Head circumference-up to ~36 mths unless otherwise indicated

E). Vital Signs-

- Heart rate
- RR
- BP
- Temp

III. Body System Assessment

A). Skin- color, texture, temp, moisture, turgor, lesions, rashes, nails & hair

B). Head- hygiene of hair, symmetry of head/skull, fontanel

C). Eyes- general appearance, pupils, visual acuity

D). Ears- general appearance, alignment, hygiene, ear wax, drainage, otoscope

- Otoscope for age infant to 3- pull pinna down and back
 - Otoscope for 3+ - pull pinna up and back
- E). Mouth- mucous membranes, teeth, gums, dental decay, lesions, throat
- F). Nose- drainage, bleeding, injury, symmetry, septum, nasal flaring
- G). Heart- Any congenital hx problems? Murmur, irregular rate/rhythm
- H). Respiratory- auscultation, rate, rhythm, O2 saturation, retractions
- I). GI/GU- Any incontinence? bowel sounds, urinary and bowel habits
- J). Genitalia- co-worker CHAPERONE*, any lesions, bruising, swelling?
- Genitalia inspection only when necessary, for a female internal exam by provider only
 - Never ask a child to remove under garments unless surgical case and parents & chaperone should be there
- K). Neurovascular/Musculoskeletal- reflexes, coordination, motor, symmetry extremities

IV. **Nursing Care of the Hospitalized Child**

A). Pediatric Hospital Room

- keep as a safe room
- painful procedures in a separate procedure room (treatment room)

B). Child Life Specialists

- help child and family prepare for procedures, can do activities/support
- help to identify child strengths and enhance their growth during stay

V. **Family Structures**

A). Family- two or more members who interact and are dependent on each other for social/emotional/financial support.

Different family structures

- Nuclear family- typical husband, wife, and child or children
- Extended- multiple generations living together
- Blended- remarried parents and children of former marriages/partnerships
- Single parent- single parent and child/children make up the family
- Same sex- same sex partners and their child/children

B). Family centered care- Family is the constant in the child's life. Whole family

VI. **Socioeconomic Issues**

- The #1 influence on health is the socioeconomic status of the patient
- Is healthcare accessible?
- Is preventative health maintenance done?