

We will work through this packet together in lab)

Sammie Mills 12 mo.F
DOB 08/11/20XX
MR 0065245878

Pediatric IVP, IVPB, IVF Lab

Situation

- **Chief Complaint:** Excessive vomiting and diarrhea for 24 hours. En route to ED, parents and Sammie are involved in MVC.

Background

- **Admission Data:** Vomiting/diarrhea for 24 hours. Involved in MVC. Parents being treated in adult ED.
- **Allergies:** unknown **Code Status:** Full **Weight:** 19 lbs.
- **Pertinent Medical History:** Unknown at this time. **Pertinent Psychosocial History:** Unavailable.

Assessment

- **Vital Signs:** Admitting vital signs: HR 150, RR 34, temp 98.6F, BP 100/50, O2 sat 96%.
- **Pertinent Assessment:**
 - Awake, alert, crying, no tears, grimacing, difficult to console, right thigh swollen with little movement of that leg noted, otherwise restless. Skin pale, capillary refill 4 seconds.
- **Physician Orders:**
 - NPO
 - Strict I&O
 - INT
 - Morphine 0.8 MG IV q 4 hours prn severe pain
 - CBC and electrolytes stat
 - X ray right thigh stat

Recommendation

- INT, CBC, electrolytes, x ray results pending. Vital signs due. No pain meds given yet.

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- What are 3 actual/potential nursing problems for this child?

Calculate the child's weight in kilograms: 19 lbs. = _____ kg

- How would you approach this child?
- In what order should you assess vital signs?
- Current VS: Apical heart rate _____ Respiratory rate _____ Pain score _____

Pain medication administration:

- What is the therapeutic range?
- What is the recommended rate of administration? Dilution needed?
- How many mLs of medication should you draw out of the vial?

What are the steps for administering an IVP per INT?

S _____

A _____

S _____

30 minutes have passed. The ED physician reassessed the child and has added orders. X ray reveals fractured femur.

New orders:

- o IVF : D5 1/4NS + 20 meq KCL/liter at 65 ml/hour
- o Ceftriaxone 450 MG IV on call to OR, then Ceftriaxone 450 mg every 24 hours x 3 doses
- o Consent for closed reduction/internal fixation and spica cast immobilization

Maintenance fluid requirements for this child _____mL/hr

Child's fluid intake since admission _____mL

The minimum acceptable urine output for this child is _____mL/hr

The child has voided 20 mL dark, yellow urine since admission 2 hours ago.

Child's urine output since admission _____mL/hr

Would you question any of the physician's orders? If so why?

Four hours have passed. The child is waiting in the ED for an OR room to become available. Pain score is 9/10. What is your nursing plan/priority?

The antibiotic has arrived from pharmacy.

- Why was ceftriaxone prescribed for this child?
- What type organism does the antibiotic target?
- What part(s) of the body does the antibiotic target?

OR called. Antibiotic to be given now.