IM5 (Pediatrics) Critical Thinking Worksheet   Patient Age: 11   Patient Weight: 43.8kg

Student Name: Kaitlyn Patrick	Unit: PF2 Pt. Initials: A.A	Date: 1/19/2021
1. **Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):** Aplastic anemia is related to the bone marrow hypocellularity which causes peripheral cytopenia. Hematopoietic stem cell injury is a result due to auto-immune dysregulated T-cell homeostasis. The stem cell injury results in an acquired form of the disease causing a lower percentage of hemoglobin and hematocrit levels.	**2. Factors for the Development of the Disease/Acute Illness:** Autoimmune disorders P Thrombocytopenia P Radiation and Chemotherapy P Viral infections Pregnancy Exposure to toxic chemicals	**3. Signs and Symptoms:** Bruising P Unintentional weight loss P Fatigue P Shortness of breath Dizziness Fever Headache P Prolonged Bleeding P
4. Diagnostic Tests Pertinent or Confirming of Diagnosis: CBC P HgB/ Hct P Physical exam P Bone marrow Biopsy P	**5. Lab Values That May Be Affected:** RBC P WBC P Hgb P Hct P	**6. Current Treatment (Include Procedures):** Lab draws P Blood transfusion P Stem cell transplant Immunosuppressants P Bone marrow stimulants Antibiotics P Antivirals Rest P

Adopted: August 2016

Student Name: Kaitlyn Patrick	**Unit:** PF2 **Pt. Initials:** A.A	**Date:** 1/19/2021
7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient. 1. Music therapy 2. Distractive therapy by using her phone or Ipad ***List All Pain/Discomfort Medication on the Medication Worksheet** Morphine Sulfate Inj	**8. Calculate the Maintenance Fluid Requirement (Show Your Work):** 10kg*100=1000 10kg*50=500 23.8kg*20=476 Total: 1976/24= 82.3 **Actual Pt MIVF Rate:** 80mLs/hr **Is There a Significant Discrepancy?** | | **Why?** N/A	**9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):** 1mL/kg/hr 1ml/kg= X/43.8kg= 43.8mL/kg/hr **Actual Pt Urine Output:** Not documented as mL just as 3.

Student Name: Kaitlyn Patrick	**Unit:** PF2 **Pt. Initials:** A.A	**Date:** 1/19/2021
	10. Growth & Development: List the Developmental Stage of Your Patient For Each Theorist Below and Document 2 OBSERVED Developmental Behaviors for Each Theorist. If Developmentally Delayed, Identify the Stage You Would Classify the Patient: **Erickson Stage:** Industry Vs. Inferiority 1. I asked the patient if she needed help with her homework and she refused politely. She said that she could do it herself. 2. She also had a positive attitude in regards to being independent. **Piaget Stage:** Concrete Operations 1. She is having difficulty with her disease and coping with the future. 2. She also said that she missed her friends from school.	
11. Focused Nursing Diagnosis: Imbalanced Nutrition **12. Related to (r/t):** Depression	**15. Nursing Interventions related to the Nursing Diagnosis in #11:** **1.** Observe for potential barriers to eating such as willingness, ability, and appetite. **Evidenced Based Practice:** Depression, impaired function, and poor oral intake are associated with likelihood of weight loss, low BMI, and poor nutrition in nursing home residents. (Tamaura et al, 2013). **2.** Offer oral nutritional supplements early after admission and continue to encourage intake of oral nutritional supplements throughout the hospital stay.	**16. Patient/Caregiver Teaching:** **1.** Teach the patient ways to identify negative thoughts by keeping a diary/log. **2.** Teach the parent different foods that would be beneficial while interesting for the patient. **3.** Teach the patient different coping techniques when feeling anxious or depressed.

Student Name: Kaitlyn Patrick	**Unit:** PF2 **Pt. Initials:** A.A	**Date:** 1/19/2021
13. As evidenced by (aeb): Patient stating "I am just not happy right now because I am sick all the time." **14. Desired patient outcome:** Patient will have an understanding and a desire to eat an adequate amount of calories for her age by the time of discharge.	**Evidenced Based Practice:** A study found that use of ONS in the inpatient population decreased LOS, episode cost, and 30-day remission risk (Philipson et al, 2013). 3. Avoid interruptions during mealtimes and offer companionship; meals should be eaten in a calm and peaceful environment. **Evidenced Based Practice:** A study found that the implementation of protected mealtimes and use of additional assistant-in-nursing assistance alone and in combination imporved nutritional intake of hospitalized clients (Young et al, 2013).	**17. Discharge Planning/Community Resources:** **1.** Support group for children with ALL **2.** Counseling **3.** Family counseling