

**IM5 (Pediatrics) Critical Thinking Worksheet****Patient Age:** 3 years**Patient Weight:** 15 kg

<b>Student Name:</b> Dylan Kitten	<b>Unit:</b> Pedi <b>Pt. Initials:</b>	<b>Date:</b> 1/29/2021
<p><b>1. Disease Process &amp; Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</b></p> <p>Kawasaki disease- causes extensive inflammation of the arterioles, venules, and capillaries resulting in many clinical symptoms. Also segment damage to medium-sized muscular arteries like the coronary artery can occur resulting in formation of coronary artery aneurysms. Death can occur but it's rare, and it may results from coronary thrombosis which causes ischemia of the myocardia tissue causing cell death.</p> <p>Works Cited</p> <p>Hockenberry, M., Wilson, D., &amp; Rodgers, C. (2017). Wong's Essentials of Pediatric Nursing. St. Louis, MO: Elsevier.</p>	<p><b>2. Factors for the Development of the Disease/Acute Illness:</b></p> <p>Children under the age of 5 years (P) Males (P) Asians or Asian descent (P)</p>	<p><b>3. Signs and Symptoms:</b></p> <p>Fever 5 or more days (P) Very irritable (P) Erythema/Edema of Hands &amp; Feet (P) Bilateral Conjunctival Inflammation (P) Strawberry tongue/Diffuse redness of oral cavity (P) Polymorphous Rash (P) Cervical Lymphadenopathy Desquamation of Fingers/Toes Thrombocytosis Beau's Lines on finger and toe nails</p>

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<b>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</b> No specific diagnostic test (P) History and Physical (P)	<b>5. Lab Values That May Be Affected:</b> CRP (P) ESR (P) CBC- platelet count	<b>6. Current Treatment (Include Procedures):</b> Administering IV Gamma Globulin (P) Aspirin (P) Clear liquid and soft food diet (P) Rest (P)
<b>7. Pain &amp; Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain &amp; Discomfort for This Patient.</b>  1. Distraction by game or things like bubbles.  2. Having the parents hold and rock the patient.  <b>*List All Pain/Discomfort Medication on the Medication Worksheet</b> None	<b>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</b> $10 \text{ kg} \times 100 = 1,000$ $5 \text{ kg} \times 50 = 250$ $1,000 + 250 = 1,250 \text{ mL}/24\text{hr}$ $1250 / 24 = 52 \text{ mL}/\text{hr}$  <b>Actual Pt MIVF Rate:</b> Not observed or recorded.  <b>Is There a Significant Discrepancy?</b> <input type="text"/>  <b>Why?</b> Not observed or recorded.	<b>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</b> $15 \text{ kg} \times 0.5 = 7.5 \text{ mL}/\text{hr}$  <b>Actual Pt Urine Output:</b> Not observed or recorded.

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	<p><b>10. Growth &amp; 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:</b></p> <p><b>Erickson Stage:</b> Initiative versus Guilt</p> <ol style="list-style-type: none"> <li>Asking many quesitons about items in the room.</li> <li>Wanting to make decisions about what is happening to them.</li> </ol> <p><b>Piaget Stage:</b> Preoperational Period</p> <ol style="list-style-type: none"> <li>Giving animal qualities to the stethoscope and other instruments.</li> <li>Thinking that something going in their mouth won't affect their head.</li> </ol>	
<p><b>11. Focused Nursing Diagnosis:</b> Impaired Skin Integrity</p>	<p><b>15. Nursing Interventions related to the Nursing Diagnosis in #11:</b></p> <ol style="list-style-type: none"> <li>Dress the child in a light clothing.</li> </ol> <p><b>Evidenced Based Practice:</b> Heavy clothing may constrict and irritate the rashes.</p>	<p><b>16. Patient/Caregiver Teaching:</b></p> <ol style="list-style-type: none"> <li>Teach parents CPR for children with severe coronary artery aneurysms.</li> <li>Teach parents signs and symptoms of cardiac ischemia and the importance of notifying their provider if they notice any.</li> </ol>
<p><b>12. Related to (r/t):</b> Altered circulation, peripheral erythema, and edema formation</p>	<ol style="list-style-type: none"> <li>Discourage the use of soaps.</li> </ol> <p><b>Evidenced Based Practice:</b> The use of soaps makes the skin dry and predispose to skin breakdown.</p> <ol style="list-style-type: none"> <li>Remove wet and wrinkled bed linens.</li> </ol>	<ol style="list-style-type: none"> <li>Teach importance of follow-up monitoring so that any changes in the child's condition can be detected.</li> </ol>

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<b>13. As evidenced by (aeb):</b> Erythematous generalized rash, edema of hands and feet, and dry, cracked lips with fissures	<b>Evidenced Based Practice:</b> Moisture promotes skin breakdown.  <b>Work Cited</b>  Martin, P. (2020, December 05). 6 Kawasaki Disease Nursing Care Plans. Retrieved January 29, 2021, from <a href="https://nurseslabs.com/6-kawasaki-disease-nursing-care-plans/3/">https://nurseslabs.com/6-kawasaki-disease-nursing-care-plans/3/</a>	<b>17. Discharge Planning/Community Resources:</b> <b>1.</b> Help parents set up appointment for follow-up monitoring.  <b>2.</b> Give resources like support groups for the patients so that they can get all the information they need to continue to support their child through this process.
<b>14. Desired patient outcome:</b> Patient will show signs of healing of peripheral erythema and no signs of increased skin breakdown by 1200 1/30/2021.		<b>3.</b> Case management to help acquire any medications and supplies they need at home. This could include how they will continually acquire aspirin since the patient may be discharged with a prescription for it.