

**IM5 (Pediatrics) Critical Thinking Worksheet**

Patient Age: 4 YO

Patient Weight: 15kg

<b>Student Name:</b> Keaton Carothers	<b>Unit:</b> PF1 <b>Pt. Initials:</b>	<b>Date:</b> 2/3/2021
<p><b>1. Disease Process &amp; Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</b></p> <p>Doctors have found that some Wilms tumors have changes in specific genes. A small number of Wilms tumors have changes in or loss of the WT1 or WT2 genes, which are tumor suppressor genes found on chromosome 11. Changes in these genes and some other genes on chromosome 11 can lead to overgrowth of certain body tissues. This may explain why some other growth abnormalities, like those described in Risk Factors for Wilms Tumors, are sometimes found along with Wilms tumors. In a small number of Wilms tumors there is a change in a tumor suppressor gene known as WTX, which is found on the X chromosome. Another gene that is sometimes altered in Wilms tumor cells is known as CTNNB1, which is on chromosome 3.</p>	<p><b>2. Factors for the Development of the Disease/Acute Illness:</b></p> <ul style="list-style-type: none"><li>-Young age (P)</li><li>-More common in girls</li><li>-More common in African Americans</li><li>-Family history</li><li>-Genetic syndromes and Birth defects</li></ul>	<p><b>3. Signs and Symptoms:</b></p> <ul style="list-style-type: none"><li>- Lump in the abdomen and neck that is not painful</li><li>- Weight loss</li><li>- Problems breathing and swallowing</li><li>- Problems with bowel movements and urinating</li><li>- Swelling of legs, upper chest, neck and face</li></ul>

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<b>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</b> -Biopsy -Bone Scan -PET scan -X-ray -MRI -CT -MIBG Scan -Ultrasound -Physical examination and History	<b>5. Lab Values That May Be Affected:</b> -Catecholamine metabolites: HVA and VMA -Liver Function Tests -BUN -Creatinine -UA for kidney function	<b>6. Current Treatment (Include Procedures):</b> Prepare child for nephrectomy and monitor kidney function. Support child and family during chemotherapy and radiation therapy.
<b>7. Pain &amp; Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain &amp; Discomfort for This Patient.</b>  1. Support the patient in various distraction methods during painful procedures like watching tv.  2. Engage the child in a coloring book or a puzzle.  <b>*List All Pain/Discomfort Medication on the Medication Worksheet</b> <a href="#">Click here to enter text.</a>	<b>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</b> $\text{First } 10 \text{ kg} \times 100 = 1,000$ $\text{Last } 5 \text{ kg} \times 50 = 250$ $1,250 \text{ ml} / 24\text{hrs}$ $= 52 \text{ ml/hr}$  <b>Actual Pt MIVF Rate:</b> N/A  <b>Is There a Significant Discrepancy?</b> <input type="text"/>  <b>Why?</b> N/A	<b>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</b> $\text{Greater than } 2 \text{ YO} = 0.5\text{mL/kg/hr}$ $0.5 \text{ mL} \times 15 \text{ kg} = 7.5 \text{ mL/hr}$  <b>Actual Pt Urine Output:</b> 7.5 mL/hr

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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 vs guilt</p> <ol style="list-style-type: none"> <li>1. The patient misbehaves occasionally and the parent disciplines them. The child will feel guilty and ashamed.</li> <li>2. The patient likes to start on projects. The patient participates in art, and other projects but often does not finish these projects.</li> </ol> <p><b>Piaget Stage:</b> Preoperational period</p> <ol style="list-style-type: none"> <li>1. Anytime the patient's nurse goes to get a blood draw or start a new IV, the patient throws a temper tantrum. The patient is fearful that he will lose a limb and cries.</li> <li>2. The patient has a small amount of patience. He throws a fit when he is promised something and does not get it immediately.</li> </ol>	
<p><b>11. Focused Nursing Diagnosis:</b> Ineffective Protection</p>	<p><b>15. Nursing Interventions related to the Nursing Diagnosis in #11:</b></p> <ol style="list-style-type: none"> <li>1. Provide a soft toothbrush for the patient.</li> </ol> <p><b>Evidenced Based Practice:</b> Using a soft toothbrush ensures no unavoidable bleeding will occur.</p>	<p><b>16. Patient/Caregiver Teaching:</b></p> <ol style="list-style-type: none"> <li>1. Teach the parents the importance of reporting any fever, behavior changes, pallor, bleeding or exposure to any illness.</li> <li>2. Teach parents the importance of being gentle with the abdominal area where the mass is in order to avoid rupturing the tumor.</li> <li>3. Teach the parents about NADIR which often occurs between 7 and 12 days after you receive chemotherapy and is when the patient is most at risk for infection.</li> </ol>
<p><b>12. Related to (r/t):</b> Radiation, chemotherapy agents, anemia, coagulation, frequent bleeding episodes</p>	<ol style="list-style-type: none"> <li>2. Apply pads for the side of the bed.</li> </ol> <p><b>Evidenced Based Practice:</b> Providing extra padding on the beds will ensure no bruising could occur from position changes.</p> <ol style="list-style-type: none"> <li>3. Ensure to hold pressure for 5 minutes after any</li> </ol>	

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<p><b>13. As evidenced by (aeb):</b> Bone marrow suppression, and immunosuppression against infections</p>	<p>needle stick.</p> <p><b>Evidenced Based Practice:</b> Chemotherapy often decreases platelets in the blood causing bleeding and bruising.</p>	<p><b>17. Discharge Planning/Community Resources:</b></p> <p><b>1.</b> Upon discharge with a port-a-cath, use the teach back method to ensure parents can perform proper antiseptic care of the IV.</p> <p><b>2.</b> Therapy for patient and family to deal with the stress that cancer poses on families.</p> <p><b>3.</b> Ensure patient has proper equipment and access to port-a-cath resources.</p>
<p><b>14. Desired patient outcome:</b> Establish and ensure that a proper environment and specific precautions are taken for the patient that will limit trauma by 2/4/21.</p>		