

**IM5 (Pediatrics) Critical Thinking Worksheet**

**Patient Age:** 10

**Patient Weight:** 46.6kg

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| <p><b>Student Name:</b> Celeste Ortiz</p>  | <p><b>Unit:</b> Pedi <b>Pt. Initials:</b> Pt. 1</p>   | <p><b>Date:</b> 3/11/2021</p>   |
| <p><b>1. Disease Process &amp; Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</b><br/>                 Diabetes Mellitus is a chronic disorder of metabolism characterized by hyperglycemia and insulin resistance. Diabetes type 1, the beta cells are destroyed causing an insulin deficiency which then leads to hyperglycemia. hyperglycemia occurs when the glucose is unable to enter the cells, so it is distributed into the blood stream.</p> | <p><b>2. Factors for the Development of the Disease/Acute Illness:</b><br/>                 Family history P<br/>                 African american P<br/>                 environmental factors</p> | <p><b>3. Signs and Symptoms:</b><br/>                 polyphagia<br/>                 polyuria P<br/>                 polydipsia P<br/>                 weight loss<br/>                 irritable<br/>                 dry skin<br/>                 fatigue P<br/>                 flushed skin</p> |
| <p><b>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</b><br/>                 HbA1c</p>   | <p><b>5. Lab Values That May Be Affected:</b><br/>                 BG<br/>                 UA</p>   | <p><b>6. Current Treatment (Include Procedures):</b><br/>                 Insulin administration</p>  |

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| <p><b>7. Pain &amp; Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain &amp; Discomfort for This Patient.</b></p> <ol style="list-style-type: none"> <li>1. Coloring books and distraction during episodes of pain.</li> <li>2. Parents touch; hugging/ holding.</li> </ol> <p><b>*List All Pain/Discomfort Medication on the Medication Worksheet</b><br/> <a href="#">Click here to enter text.</a></p> | <p><b>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</b></p> <p>Pt wt. - 46.6kg<br/> <math>10 * 100 = 1000</math><br/> <math>10 * 50 = 500</math><br/> <math>26 * 20 = 520</math><br/> total - <math>2020 / 24 = 84.17</math> ml/hr</p> <p><b>Actual Pt MIVF Rate:</b> N/A</p> <p><b>Is There a Significant Discrepancy?</b><br/> <input type="text"/></p> <p><b>Why?</b> N/A patient was not connected to any IVF.</p> | <p><b>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</b></p> <p><math>0.5\text{ml/kg/hr}</math><br/> <math>0.5 * 46.6 = 23.3</math></p> <p><b>Actual Pt Urine Output:</b> patient was not on a strict I&amp;O</p> |

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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> Industry vs. Inferiority</p> <ol style="list-style-type: none"> <li>Pt. 1 was always eager to know what we were going to do, as well as wanting to participate in her own care.</li> <li>Pt. 1 was also showing some degree of inferiority when she was unable to complete a coloring page the way she wanted.</li> </ol> <p><b>Piaget Stage:</b> Concrete Operational Period</p> <ol style="list-style-type: none"> <li>This patient was also very objective to others, especially her mother as well as the nurses. I noticed that when we went in to take vitals she got up from sitting on the floor fast so we could assess her properly.</li> <li>This patient also understood the concept of reversibility, I observed this when she would fold her paper into a certain shape and then would unfold it to begin doing something else with it.</li> </ol> |  |
| <p><b>11. Focused Nursing Diagnosis:</b><br/>Imbalanced nutrition</p> | <p><b>15. Nursing Interventions related to the Nursing Diagnosis in #11:</b></p> <ol style="list-style-type: none"> <li>note lab values cautiously ; WBC ; Blood glucose</li> </ol> <p><b>Evidenced Based Practice:</b><br/>(White et al, 2012)</p> <ol style="list-style-type: none"> <li>Recognize clients who are likely to experience malnutrition in the context of social or environmental circumstances.</li> </ol> <p><b>Evidenced Based Practice:</b><br/>(White et al, 2012)</p> <ol style="list-style-type: none"> <li>Conduct a nutrition screen on all clients within</li> </ol>   | <p><b>16. Patient/Caregiver Teaching:</b></p> <ol style="list-style-type: none"> <li>Teach the patient and parents on how to count carbs for insulin administration.</li> <li>Teach the patient and parents the proper way to administer insulin, and to change sites.</li> <li>lastly, show the parents / patients how to take a blood glucose level as well as how to check for ketones in urine.</li> </ol> |
| <p><b>12. Related to (r/t):</b><br/>Inability to use glucose</p>      |   |  |

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| <b>13. As evidenced by (aeb):</b><br>Increased ketones   | 24 hours of admission and refer to a dietitian as deemed necessary.<br><br><b>Evidenced Based Practice:</b><br>(Somanchi et al, 2011) | <b>17. Discharge Planning/Community Resources:</b><br><b>1.</b> Inform the parents to follow up with the PCP on follow up orders.<br><br><b>2.</b> Give the family resources to cope with a new diagnosis of type 1 diabetes.<br><br><b>3.</b> Inform the parents that there are summer/spring camps that are based on diabetes, this might be helpful for the child to get to know others with her diagnosis.. |
| <b>14. Desired patient outcome:</b><br>patient will show no ketones in the UA at 1700 03/14/2021<br><br>Hockenberry, M. J., Wilson, D. & Rodgers, C.C (2017). Wong's essentials of pediatric nursing (10th ed.). Elsevier. ISBN: 978-0-323-35316-8<br><br>Ackley, B. J., Ladwig, G. B., Beth, M. F., Martinez-Kratz, M. R., & Zanotti, M. (2020). Nursing diagnosis handbook: An evidence-based guide to planning care. St. Louis, MO: Elsevier. |   |   |