

IM5 (Pediatrics) Critical Thinking Worksheet

Patient Age: 11 y/o

Patient Weight: 61.7 kg

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<p>1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</p> <p>Cholelithiasis is the presence of gallstones in the common bile duct. The cause of gallstones is unknown. They form when the balance that keeps cholesterol, bile salts, and calcium in solution is changed so that these substances precipitate. Bile that is secreted by the liver becomes increasingly high in cholesterol. Gallstones that become lodged in the bile ducts can lead to infection that may spread to other organs of the body such as the liver or pancreas.</p> <p>Lewis's Medical Surgical Nursing Eleventh Edition</p>	<p>2. Factors for the Development of the Disease/Acute Illness:</p> <ul style="list-style-type: none"> ● Obesity ● Low-fiber, high-calorie, high-fat diet ● Pregnancy ● Prolonged fasting ● Rapid weight loss ● Lack of physical activity ● older age ● female (P) ● ethnicity (Asians, American Indians, Mexican Americans) (P) ● family history <p>https://www.healthline.com/health/choledocholithiasis#treatment</p>	<p>3. Signs and Symptoms:</p> <ul style="list-style-type: none"> ● Abdominal pain (P) ● Fever ● Jaundice ● Loss of appetite ● Nausea (P) ● Vomiting ● Clay-colored stools

<p>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</p> <ul style="list-style-type: none"> ● Gallbladder ultrasound ● MRI 	<p>5. Lab Values That May Be Affected:</p> <ul style="list-style-type: none"> ● CBC (P) ● Bilirubin (P) ● Pancreatic enzymes (P) ● Liver function tests (P) 	<p>6. Current Treatment (Include Procedures):</p> <p>MRI performed to determine next step in treatment</p>
<p>7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient.</p> <ol style="list-style-type: none"> 1. Distraction using the internet 2. Relaxation techniques <p>*List All Pain/Discomfort Medication on the Medication Worksheet Acetaminophen Morphine sulfate</p>	<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work): $(100)(10) = 1,000$ $(50)(10) = 500$ $(20)(41.7) = 834$</p> <p>$(1,000) + (500) + (834) = 2,334$ $2,334/24 = 97\text{mL/hour}$</p> <p>Actual Pt MIVF Rate: 100mL/hr</p> <p>Is There a Significant Discrepancy? No</p>	<p>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work): $(0.5)(61.7) = 31\text{mL/hr}$</p> <p>Actual Pt Urine Output: voids not measured</p>

	<p>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:</p> <p>Erickson Stage: Identity vs role confusion</p> <ol style="list-style-type: none"> 1. Patient interacted with friends through social media 2. Patient expressed concerns and needs with parents and staff <p>Piaget Stage:</p> <ol style="list-style-type: none"> 1. Patient involved in discussions regarding future plans for treatment 2. Patient coordinated own schedule for her day to meet personal needs 	
<p>11. Focused Nursing Diagnosis: Acute pain</p> <p>https://nurseslabs.com/5-pancreatitis-nursing-care-plans/6/</p>	<p>15. Nursing Interventions related to the Nursing Diagnosis in #11:</p> <ol style="list-style-type: none"> 1. Maintain bedrest during pain attacks and provide restful environment <p>Evidenced Based Practice: Decreases the metabolic rate and GI stimulation as well as secretions, reducing pancreatic activity</p> <ol style="list-style-type: none"> 2. Position on side with knees flexed, sitting up and leaning forward <p>Evidenced Based Practice: Reduces abdominal pressure and tension</p> <ol style="list-style-type: none"> 3. Provide alternative comfort measures such as back rubs, and guided imagery 	<p>16. Patient/Caregiver Teaching:</p> <ol style="list-style-type: none"> 1. Teach patient that keeping the environment free of food odors can decrease activation of pancreatic enzymes and help keep from increasing pain. 2. Teach patient how to perform breathing exercises to promote relaxation 3. Educate on the use of warm compresses to relieve pain
<p>12. Related to (r/t): Obstruction of pancreatic, biliary ducts</p>		

<p>13. As evidenced by (aeb): Patient reports pain in upper abdomen a 7 out of 10 on numeric pain scale</p>	<p>Evidenced Based Practice: Promotes relaxation and forces patient to shift attention to other activities</p>	<p>17. Discharge Planning/Community Resources:</p> <ol style="list-style-type: none"> 1. Physical therapy to recommend exercise activity useful in promoting healthy lifestyle 2. Dietician to provide appropriate diet to reduce risk for future formation of gallstones 3. Provide handouts containing gallstone prevention
<p>14. Desired patient outcome: Patient will report pain of less than 5 on a numeric pain scale by 1800.</p>		