

IM5 (Pediatrics) Critical Thinking Worksheet

Patient Age: 2 M 26D

Patient Weight: 4.04 kg

<p>Student Name: Stephanie Pigg</p>	<p>Unit: PICU Pt. Initials: WB</p>	<p>Date: 9/8/2021</p>
<p>1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference): Extrahepatic biliary systems of infants undergoing portoenterostomy, the pathogenesis of this disorder remains poorly understood. Congenital malformation of the biliary ductular system. Problems of hepatobiliary ontogenesis are suggested by the fetal/embryonic form of atresia. The more common neonatal type is characterized by a progressive inflammatory lesion, which suggests a role for infectious and/or toxic agents causing bile duct obliteration. Resource: Medscape</p>	<p>2. Factors for the Development of the Disease/Acute Illness: Asian and African American population Females > males Late gestational etiology GI and cardiac anomalies</p>	<p>3. Signs and Symptoms: Jaundice (P) Dark urine (P) Light stools Hyperbilirubinemia (P) Hepatomegaly (P)</p>
<p>4. Diagnostic Tests Pertinent or Confirming of Diagnosis: Ultrasonography Hepatobiliary scintiscanning Duodenal intubation and duodenal string test Endoscopic retrograde cholangiopancreatography</p>	<p>5. Lab Values That May Be Affected: Serum bilirubin (total & direct) Alkaline phosphatase 5' Nucelotidase Gamma-glutamyl transpeptidase Serum aminotransferases Serum bile acids Serum alpha1-antitrypsin with Pi typing Sweat chloride</p>	<p>6. Current Treatment (Include Procedures): No primary medical treatment is relevant in the management of extrahepatic biliary atresia Surgical intervention is the only mechanism available for a definitive diagnosis (intraoperative cholangiography) and therapy (Kasai portoenterostomy)</p>

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<p>7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient.</p> <p>1.</p> <p>2.</p> <p>*List All Pain/Discomfort Medication on the Medication Worksheet Click here to enter text.</p>	<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</p> <p>Actual Pt MIVF Rate:</p> <p>Is There a Significant Discrepancy? <input type="text"/></p> <p>Why?</p>	<p>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</p> <p>Actual Pt Urine Output:</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:</p> <p>1.</p> <p>2.</p> <p>Piaget Stage:</p> <p>1.</p> <p>2.</p>	

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11. Focused Nursing Diagnosis:	15. Nursing Interventions related to the Nursing Diagnosis in #11: 1. Evidenced Based Practice:	16. Patient/Caregiver Teaching: 1. 2. 3.
12. Related to (r/t):	2. Evidenced Based Practice: 3. Evidenced Based Practice:	
13. As evidenced by (aeb):		17. Discharge Planning/Community Resources: 1. 2. 3.
14. Desired patient outcome:		