

IM5 (Pediatrics) Critical Thinking Worksheet**Patient Age:** 3**Patient Weight:** 27kg

Student Name: Melanie Inman	Unit:	Pt. Initials:	Date: 10/25/2021
1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference): Asthma Exacerbation	2. Factors for the Development of the Disease/Acute Illness: Environmental , Allergies		3. Signs and Symptoms: Wheezing, anxious, restless
4. Diagnostic Tests Pertinent or Confirming of Diagnosis: Low o2 sats.	5. Lab Values That May Be Affected: WBC 18,CO2 20,Chloride 95		6. Current Treatment (Include Procedures): VS q 4 ,Strict I/O, D5 1/2 NS with 20KCL @ 70ml/hr, Albuterol 0.083% HHN q 4 and prn, CBC,BMP Methylprednisolone 13.5 mg iv push q 12, Fall precautions

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7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient. 1. Maintain elevated HOB 2. Allow mother to comfort and console patient *List All Pain/Discomfort Medication on the Medication Worksheet Ibuprofen 270 mg po q 6 prn .	8. Calculate the Maintenance Fluid Requirement (Show Your Work): 10x100=1000,10x50=500,7x20=140 total 1640 Actual Pt MIVF Rate: 70 Is There a Significant Discrepancy? <input type="checkbox"/> Why? 40ml overage	9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work): 0.5ml/kg/hr,0.5x27=13.5/hr Actual Pt Urine Output: no output documented
	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: Erickson Stage: Autonomy vs.shame and doubt 1. Restless and anxious looking 2. No other behaviors documented Piaget Stage: Sensorimotor: Object permanence,Domestic mimicry Imitation 1. Restless and anxious looking 2. No other behaviors documented	

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11. Focused Nursing Diagnosis: Ineffective breathing pattern	15. Nursing Interventions related to the Nursing Diagnosis in #11: 1. Monitor respiratory rate ,breath sounds ,o2 sats. Evidenced Based Practice: 2. medication therapy as ordered	16. Patient/Caregiver Teaching: 1. Identify symptom triggers and eliminate; do not smoke around child 2. Administer nebulizer or MDI if or and, as prescribed 3. Encourage adequate rest,sleep,and well balanced diet
12. Related to (r/t): Asthma exacerbation	Evidenced Based Practice: 3. Apply O2 if O2 sats below 92% Evidenced Based Practice:	17. Discharge Planning/Community Resources: 1. Provide specific guidelines for hydration 2. Avoid iced fluids 3. Encourage the parents to keep immunizations up to date
13. As evidenced by (aeb): Low oxygen saturations		
14. Desired patient outcome: Patient will maintain optimal breathing pattern ,as evidenced by relaxed breathing and normal respiratory rate and pattern.		