

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

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1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference): asthma- inflammatory disease of the airways. Patient had an acute exacerbation, he has wheezing in lower lobes. He is also on oxygen. Saunders Comprehensive Review NCLEX- RN	2. Factors for the Development of the Disease/Acute Illness: The patient has multiple allergies which could have triggered the attack. Irritants, changes in the weather, colds/infections could also all contribute to the acute attack.	3. Signs and Symptoms: wheezing, low oxygen saturation, anxious looking, restless.
4. Diagnostic Tests Pertinent or Confirming of Diagnosis: made on patients symptoms, history/physical exam. In this case patient had low o2 and wheezing.	5. Lab Values That May Be Affected: WBC, Potassium, chloride, CO2.	6. Current Treatment (Include Procedures): ibuprofen PRN for temp >101 degrees F or discomfort, Methylprednisolone 13.5 mg IV push q 12 hrs. Albuterol 0.083 percent 3 mL HHN every 4 hrs and PRN. Supplemental oxygen to keep o2 sats greater than 94 percent.

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<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. play time to help with distraction. 2. reading a book, playing music. <p>*List All Pain/Discomfort Medication on the Medication Worksheet Methylprednisolone 13.5 mg IV push q 12 hrs, Ibuprofen 270 mg PO every 6 hrs prn, albuterol 0.083 percent.</p>	<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work): $10 \text{ kg} \times 100 = 1000 \text{ mL}$ $10 \text{ kg} \times 50 = 500 \text{ mLs}$ $7 \times 20 = 140 \text{ mLs}$ $1000 + 500 + 140 = 1,640 \text{ mLs}/24 \text{ hrs}$</p> <p>Actual Pt MIVF Rate: $1,640/24 \text{ hrs} = 68.3 \text{ mL/hr}$</p> <p>Is There a Significant Discrepancy? <input type="checkbox"/></p> <p>Why? the order is for the patient to get 70 mL/hr of IV fluids which would equal a total of 1,680 mL in 24 hours. This is more than the maintenance fluid requirement for the patient of this weight which could lead to fluid overload.</p>	<p>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work): $13.5 \text{ mL/hr} = 0.5 \text{ mL} \times 27 \text{ kg} = 13.5 \text{ mL/hr}$</p> <p>Actual Pt Urine Output: unknown</p>

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	<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: autonomy vs shame/doubt</p> <ol style="list-style-type: none"> 1. toileting 2. feeding/dressing <p>Piaget Stage: Preoperational stage</p> <ol style="list-style-type: none"> 1. should have strong imagination 2. complex abstract thoughts are difficult. 	
<p>11. Focused Nursing Diagnosis: anxiety.</p>	<p>15. Nursing Interventions related to the Nursing Diagnosis in #11:</p> <ol style="list-style-type: none"> 1. administer medications per order to help treat symptoms. apply oxygen per order to aid in breathing to decrease anxiety. <p>Evidenced Based Practice: rescue meds are used to treat symptoms/exacerbations.</p> <ol style="list-style-type: none"> 2. apply oxygen per order to aid in breathing to decrease anxiety. . <p>Evidenced Based Practice:</p>	<p>16. Patient/Caregiver Teaching:</p> <ol style="list-style-type: none"> 1. Teach caregiver how to prevent/reduce exposure to allergens 2. Instruct caregiver to give all inhalers/medications as prescribed, instruct how to use metered dose inhalers.
<p>12. Related to (r/t): ineffective airway clearance.</p>	<p>Evidenced Based Practice:</p>	<ol style="list-style-type: none"> 3. teach caregiver how to recognize early symptoms of asthma attack.

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<p>13. As evidenced by (aeb): wheezing in lower lung lobes. .</p>	<p>with an acute asthma attack you lose oxygen, supplementnal oxygen makes up for the lack of making it easier to breathe.</p> <p>3. Encourage adequate fluid intake.</p> <p>Evidenced Based Practice: fluid intake helps liquify secretions which would aid in breathing easier and reducing coughing and symptoms of asthma.</p>	<p>17. Discharge Planning/Community Resources:</p> <p>1. Caregiver demonstrates correct use of medications.</p> <p>2. Make sure caregiver is aware of patient having quick relief inhaler at all times.</p> <p>3. Try to help patient void any environmental triggers. Provide community resources.</p>
<p>14. Desired patient outcome:</p> <p>Patient will show signs of decreased anxiety/restlessness by maintaining o2 sats above 95 percent</p>		