

IM5 (Pediatrics) Critical Thinking Worksheet**Patient Age:** 8 days**Patient Weight:** 3.6kg

Student Name: Briana Marin	Unit: NICU Pt. Initials:	Date: 12/15/2021
1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference): Imperforated anus, During the embryonic development the cloaca becomes the channel for developing urinary, genital, and rectal systems. The cloaca is then divided at the sixth week of gestation into an anterior urogenital sinus and a posterior intestinal channel by the urorectal septum. After the lateral folds join the urorectal septum, separation of the urinary and rectal segments takes place. Further differentiation results in the anterior GU system and the posterior anorectal channel. An interruption of this development leads to incomplete migration of the rectum to its normal perineal position.	2. Factors for the Development of the Disease/Acute Illness: Abnormal development (P)	3. Signs and Symptoms: Abdominal distention Vomiting Absence of meconium passage (P) Presence of meconium in the urine (P)

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4. Diagnostic Tests Pertinent or Confirming of Diagnosis: Physical finding of an absent anal opening. (P) Abdominal and pelvic ultrasonography Voiding cystourethrogram Pelvic magnetic resonance imaging Radiography Ultrasound Fluoroscopic examination of pelvic anatomic contents and lower spinal anatomy	5. Lab Values That May Be Affected: WBC (P), Hemoglobin (P), Hematocrit (P), RBC, BMP (P) Urinary culture	6. Current Treatment (Include Procedures): Surgery Anoplasty Colostomy (P) Posterior sagittal anorectalplasty Antibiotics (P)