

IM5 (Pediatrics) Critical Thinking Worksheet

Patient Age: 8 yr

Patient Weight: 36.8 kg

Student Name: Whitney Gould	Unit: Pedi Pt. Initials:	Date: 1/4/2022
1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference): Periorbital Cellulitis Pathogens causing sinusitis, especially ethmoiditis, spread to nearby tissues through the valveless ophthalmic venous system or the lamina papyracea. Some of the most common complications of sinusitis are periorbital or orbital involvement.	2. Factors for the Development of the Disease/Acute Illness: Bacteria Viruses Fungi Helminths Sinusitis (P) Eyelid trauma	3. Signs and Symptoms: Swelling of eyelid (P) Redness of eyelid (P) Pain Fever (P) General discomfort of eye (P) Skin in affected area is tender or tough to the touch (P) A cut, scratch, or insect bite near eye Reddened sclera
4. Diagnostic Tests Pertinent or Confirming of Diagnosis: CT Scan MRI (P) Physical Eye Exam (P) Blood cultures Specimen sample (discharge)	5. Lab Values That May Be Affected: WBC RBC Creatinine Bicarbonate Creatine Phosphokinase CRP	6. Current Treatment (Include Procedures): Amoxicillin Clindamycin (P) Doxycycline Trimethoprim Pipercillin/Tazobactam Cefuroxime Ceftriaxone (P) Surgery

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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. Distraction by painting a picture with mom 2. Distraction by dancing with the CLS <p>*List All Pain/Discomfort Medication on the Medication Worksheet Ibuprofen, Acetaminophen</p>	<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work): $10 \times 100 = 1000$, $10 \times 50 = 500$, $16.8 \times 20 = 336$ $1000 + 500 + 336 = 1836 \text{ mL/day}$ or 76.5 mL/hr</p> <p>Actual Pt MIVF Rate: 80 mL/hr</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): 0.5 mL/kg/hr $0.5 \text{ mL} \times 36.8 \text{ kg} = 18.4 \text{ mL/hr}$</p> <p>Actual Pt Urine Output: not being measured, no data found in patient chart</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: Industry vs. Inferiority</p> <ol style="list-style-type: none"> 1. Eager to start painting 2. Patient realizes the need for rest after dancing with the CLS <p>Piaget Stage: Concrete Operational Period</p> <ol style="list-style-type: none"> 1. Able to tell the difference between the two different shades of blue in their painting 2. Collects stuffed animals 	
<p>11. Focused Nursing Diagnosis: Acute pain</p>	<p>15. Nursing Interventions related to the Nursing Diagnosis in #11:</p> <ol style="list-style-type: none"> 1. Distraction <p>Evidenced Based Practice: Drawing the patient away from the pain lessens the perception of pain.</p>	<p>16. Patient/Caregiver Teaching:</p> <ol style="list-style-type: none"> 1. Teach patient and parent to use heat and cold therapy intermittently, for 15-20 minutes, with a 2 hour break in between to avoid skin and nerve damage. 2. Teach patient how to use the faces pain scale
<p>12. Related to (r/t): Periorbital Cellulitis</p>	<ol style="list-style-type: none"> 2. Massage <p>Evidenced Based Practice: Massaging the effected area interrupts the pain transmission, increases endorphin levels, and decreases tissue edema.</p>	<ol style="list-style-type: none"> 3. Teach parent the proper dosing of OTC pain medication and what medicatios are appropriate for the patient's age

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13. As evidenced by (aeb): Right eye swollen and reddened	3. Cold Application Evidenced Based Practice: Cold works by reducing pain, inflammation, and muscle spasticity by decreasing the release of pain-inducing chemical and slowing the conduction of pain impulses	17. Discharge Planning/Community Resources: 1. Schedule follow-up appointment with PCP 2. Home health if iextensive eye care is needed and parent is unable to perform care 3. Consult Opthamology for possible follow-up appointment
14. Desired patient outcome: The swelling in the patient's right eye will be gone by time of discharge.		