

<p>Student Name: Tatum Lee</p>	<p>Unit: Peds Pt. Initials:</p>	<p>Date: 3/23/22</p>
<p>1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</p> <p>Acute renal injury- A sudden episode of kidney failure or kidney damage. AKI causes a build up of waste products in your blood and makes it harder for your kidneys to filter causing dangerous levels.</p>	<p>2. Factors for the Development of the Disease/Acute Illness:</p> <ul style="list-style-type: none"> -low blood pressure -blood/ or fluid loss -organ failure -burns -major surgery 	<p>3. Signs and Symptoms:</p> <ul style="list-style-type: none"> -fatigue -shortness of breath -too little urine leaving the body -confusion -chest pain -seizures
<p>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</p> <ul style="list-style-type: none"> -ultrasound -abdomen ct <p>Makris, K., & Spanou, L. (2016, May). <i>Acute kidney injury: Definition, pathophysiology and clinical phenotypes</i>. The Clinical biochemist. Reviews. Retrieved March 24, 2022, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5198510/</p>	<p>5. Lab Values That May Be Affected:</p> <ul style="list-style-type: none"> -creatinine -BUN -GFR -Urinalysis 	<p>6. Current Treatment (Include Procedures):</p> <ul style="list-style-type: none"> -I/O -antibiotics -increasing fluid intake -urinary catheter -electrolyte replacement

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7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient. 1. Distraction 2. hot/cold *List All Pain/Discomfort Medication on the Medication Worksheet -motrin -tylenol	8. Calculate the Maintenance Fluid Requirement (Show Your Work): 2000ml 85ml/hr Actual Pt MIVF Rate: 120ml/hr Is There a Significant Discrepancy? Yes Why? The patient is needing fluid replacement for his dehydration	9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work): 22.5 Actual Pt Urine Output: n/a
	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: Industry vs inferiority 1. Became confident when he knew I needed to take his temp and would remove his glasses before hand 2. Parents encourage fluid intake no matter how small and didn't force out come Piaget Stage: concrete operational 1. Able to reason that he had a fever from his symptoms 2. Was not able to understand that him pulling his ekg off was why the screen was beeping at him	

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11. Focused Nursing Diagnosis: Risk for deficient fluid volume	15. Nursing Interventions related to the Nursing Diagnosis in #11: 1. Measure I&O accurately along with daily weights Evidenced Based Practice: will help evaluate fluid replacement needs	16. Patient/Caregiver Teaching: 1. Introduce different ways to incorporate fluids into everyday life 2. Educate on the s/s of increasing dehydration 3. Eat plenty of fruits and vegetables and food with extra fluid
12. Related to (r/t): Dehydration	2. Control environmental temperature Evidenced Based Practice: help reduce diaphoresis which will contribute to extra fluid loss 3. Monitor BP and HR Evidenced Based Practice: -tachycardia suggests hypovolemia meaning we need more fluid and are compensating	17. Discharge Planning/Community Resources: 1. Follow up 2. Dietary consult 3. brochure on needed fluid for everyday living
13. As evidenced by (aeb): Syncope episode, high levels of creatine, fever, n/v, poor po intake		
14. Desired patient outcome: Patient will display I&O balance, good skin turgor, moist mucous membrane, and electrolytes within normal range by Wednesday at 1230		

