

**IM5 (Pediatrics) Critical Thinking Worksheet** Patient Age:

Patient Weight: kg

<b>Student Name:</b> Tatum Lee	<b>Unit:</b> PICU <b>Pt. Initials:</b>	<b>Date:</b> <a href="#">Click here to enter a date.</a>
<p><b>1. Disease Process &amp; Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</b></p> <p>Rhinoviruses and respiratory enteroviruses -Human rhinoviruses and human enteroviruses are the most common cause of infections in people worldwide. They are members of the Enterovirus genus of the virus family Picornaviridae. They are small viruses with an infectious single-stranded RNA genome of 7,000 to 7,500 nucleotides enclosed in an icosahedral capsid. In contrast to HRVs, replication of HEVs is not restricted to the respiratory tract but also can take place in the small intestine and spread to various target organs. They are readily transmitted from person to person through an air and/or via a fecal-oral route, or even through contaminated objects.</p>	<p><b>2. Factors for the Development of the Disease/Acute Illness:</b></p> <ul style="list-style-type: none"> <li>-sneezing/ coughing into the air or on surfaces</li> <li>-immunosuppression</li> </ul>	<p><b>3. Signs and Symptoms:</b></p> <ul style="list-style-type: none"> <li>-fever</li> <li>-cough</li> <li>-nasal congestion</li> <li>-Body aches</li> <li>-headache</li> </ul>
<p><b>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</b></p> <ul style="list-style-type: none"> <li>-mri</li> <li>-exray</li> <li>-ct</li> </ul> <p>Turner, R. B. (2001, January). <i>The treatment of Rhinovirus infections: Progress and potential</i>. Antiviral research. Retrieved March 24, 2022, from <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7125581/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7125581/</a></p>	<p><b>5. Lab Values That May Be Affected:</b></p> <ul style="list-style-type: none"> <li>-high wbc</li> <li>-PCR</li> <li>-</li> </ul>	<p><b>6. Current Treatment (Include Procedures):</b></p> <ul style="list-style-type: none"> <li>-pain/ fever medications</li> <li>-plenty of fluids</li> <li>-resting</li> <li>-hand washing</li> </ul>

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<p><b>7. Pain &amp; Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain &amp; Discomfort for This Patient.</b></p> <p>1.</p> <p>2.</p> <p><b>*List All Pain/Discomfort Medication on the Medication Worksheet</b>  <a href="#">Click here to enter text.</a></p>	<p><b>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</b></p> <p><b>Actual Pt MIVF Rate:</b></p> <p><b>Is There a Significant Discrepancy? Choose an item.</b></p> <p><b>Why?</b></p>	<p><b>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</b></p> <p><b>Actual Pt Urine Output:</b></p>
	<p><b>10. Growth &amp; 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:</b></p> <p><b>Erickson Stage:</b></p> <p>1.</p> <p>2.</p> <p><b>Piaget Stage:</b></p> <p>1.</p> <p>2.</p>	

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<b>11. Focused Nursing Diagnosis:</b>	<b>15. Nursing Interventions related to the Nursing Diagnosis in #11:</b> 1.  <b>Evidenced Based Practice:</b>  2.	<b>16. Patient/Caregiver Teaching:</b> 1.  2.  3.
<b>12. Related to (r/t):</b>	<b>Evidenced Based Practice:</b>  3.  <b>Evidenced Based Practice:</b>	<b>17. Discharge Planning/Community Resources:</b> 1.  2.  3.
<b>13. As evidenced by (aeb):</b>		
<b>14. Desired patient outcome:</b>		

