Student Name: Anan T Unit: _____ Pt. initials: _____ Date: _____

GENERAL APPEARANCE

Appearance: ☐Healthy/Well Nourished ☑ Neat/Clean ☐Emaciated ☐ Unkept
Developmental age:
☑ Normal ☐ Delayed

NEUROLOGICAL

LOC: ☑ Alert ☐ Confused ☐ Restless
☐ Sedated ☐ Unresponsive
Oriented to:
☐Person ☐Place ☐Time/Event
☑ Appropriate for Age
Pupil Response: ☑ Equal ☐ Unequal
☑ Reactive to Light ☐ Size 2 mm
Fontanel: (Pt < 2 years) ☐ Soft ☐ Flat
☐ Bulging ☐ Sunken ☐ Closed
Extremities:
☑ Able to move all extremities
☑ Symmetrically ☐ Asymmetrically
Grips: Right 5 Left 5
Pushes: Right 5 Left 5
S=Strong W=Weak N=None
EVD Drain: ☐ Yes ☑ No Level _____
Seizure Precautions: ☐ Yes ☐ No

RESPIRATORY

Respirations: ☑ Regular ☐ Irregular
☐ Retractions (type) _____
☐ Labored
Breath Sounds:
Clear ☑ Right ☑ Left
Crackles ☐ Right ☐ Left
Wheezes ☐ Right ☐ Left
Diminished ☐ Right ☐ Left
Absent ☐ Right ☐ Left
☑ Room Air ☐ Oxygen
Oxygen Delivery:
☐ Nasal Cannula: ____L/min
☐ BiPap/CPAP: _____
☐ Vent: ETT size_____@_____cm
☐ Other: _____
Trach: ☐ Yes ☑ No
Size _____ Type _____
Obturator at Bedside ☐ Yes ☐ No
Cough: ☐ Yes ☑ No
☐ Productive ☐ Nonproductive
Secretions: Color_____
Consistency_____
Suction: ☐ Yes ☐ No Type _____
Pulse Ox Site L finger
Oxygen Saturation: 95

CARDIOVASCULAR

Pulse: ☑ Regular ☐ Irregular
☑ Strong ☐ Weak ☐ Thready
☐ Murmur ☐ Other _____
Edema: ☐ Yes ☑ No Location _____
☐ 1+ ☐ 2+ ☐ 3+ ☐ 4+
Capillary Refill: ☑ < 2 sec ☐ > 2 sec
Pulses:
Upper R 4+ L 4+
Lower R 4+ L 4+
4+ Bounding 3+ Strong 2+ Weak
1+ Intermittent 0 None

ELIMINATION

Urine Appearance: Clear, Yellow
Stool Appearance: _____
☐ Diarrhea ☐ Constipation
☐ Bloody ☐ Colostomy

GASTROINTESTINAL

Abdomen: ☑ Soft ☐ Firm ☐ Flat
☐ Distended ☐ Guarded
Bowel Sounds: ☐ Present X 4 quads
☐ Active ☐ Hypo ☐ Hyper ☐ Absent
Nausea: ☐ Yes ☑ No
Vomiting: ☐ Yes ☑ No
Passing Flatus: ☐ Yes ☑ No
Tube: ☐ Yes ☑ No Type _____
Location _____ Inserted to _____cm
☐ Suction Type: _____

NUTRITIONAL

Diet/Formula: _____
Amount/Schedule: _____
Chewing/Swallowing difficulties:
☐ Yes ☐ No

MUSCULOSKELETAL

☐ Pain ☐ Joint Stiffness ☐ Swelling
☐ Contracted ☐ Weakness ☐ Cramping
☐ Spasms ☐ Tremors
Movement:
☐ RA ☐ LA ☐ RL ☐ LL ☑ All
Brace/Appliances: ☑ None
Type: _____

MOBILITY

☐ Ambulatory ☐ Crawl ☐ In Arms
☐ Ambulatory with assist _____
Assistive Device: ☐ Crutch ☐ Walker
☐ Brace ☐ Wheelchair ☐ Bedridden

PSYCHOSOCIAL

Social Status: ☑ Calm/Relaxed ☐ Quiet
☐ Friendly ☐ Cooperative ☐ Crying
☐ Uncooperative ☐ Restless
☐ Withdrawn ☐ Hostile/Anxious
Social/emotional bonding with family:
☐ Present ☐ Absent

IV ACCESS

Site: L Ante PIV ☐ None
☐ Central Line
Type/Location: Antecubital 24g
Appearance: ☑ No Redness/Swelling
☐ Red ☐ Swollen
☐ Patent ☐ Blood return
Dressing Intact: ☑ Yes ☐ No
Fluids: NIA
d/c

SKIN

Color: ☐ Pink ☐ Flushed ☐ Jaundiced
☐ Cyanotic ☐ Pale ☑ Natural for Pt
Condition: ☑ Warm ☐ Cool ☐ Dry
☐ Diaphoretic
Turgor: ☑ < 5 seconds ☐ > 5 seconds
Skin: ☑ Intact ☐ Bruises ☐ Lacerations
☐ Tears ☐ Rash ☐ Skin Breakdown
Location/Description: _____
Mucous Membranes: Color: _____
☑ Moist ☐ Dry ☐ Ulceration

PAIN

Scale Used: ☑ Numeric ☐ FLACC ☐ Faces
Location: _____
Type: _____
Pain Score:
0800 0 1200 _____ 1600 _____

WOUND/INCISION

☑ None
Type: _____
Location: _____
Description: _____
Dressing: _____

TUBES/DRAINS

☑ None
☐ Drain/Tube
Site: _____
Type: _____
Dressing: _____
Suction: _____
Drainage amount: _____
Drainage color: _____

81

T 98.0
BP 125/69
O 95
O Pain
RR 14
HR 86
MAP 93

Student Name: _____ Unit: _____ Pt. initials: _____ Date: _____

INTAKE/OUTPUT													
PO/Enteral Intake	07	08	09	10	11	12	13	14	15	16	17	18	Total
PO Intake													
Intake – PO Meds													
Enteral Tube Feeding													
Enteral Flush													
Free Water													
IV INTAKE	07	08	09	10	11	12	13	14	15	16	17	18	Total
IV Fluid													
IV Meds/Flush													
OUTPUT	07	08	09	10	11	12	13	14	15	16	17	18	Total
Urine			400										
# of immeasurable													
Stool													
Urine/Stool mix													
Emesis													
Other													

Children's Hospital Early Warning Score (CHEWS) (See CHEWS Scoring and Escalation Algorithm to score each category)	
Behavior/Neuro	Circle the appropriate score for this category: 0 1 2 3
Cardiovascular	Circle the appropriate score for this category: 0 1 2 3
Respiratory	Circle the appropriate score for this category: 0 1 2 3
Staff Concern	1 pt - Concerned
Family Concern	1 pt – Concerned or absent
CHEWS Total Score	CHEWS Total Score
	Total Score (points) 0
	Score 0-2 (Green) – Continue routine assessments
	Score 3-4 (Yellow) – Notify charge nurse or LIP, Discuss treatment plan with team, Consider higher level of care, Increase frequency of vital signs/CHEWS/assessments, Document interventions and notifications
	Score 5-11 (Red) – Activate Rapid Response Team or appropriate personnel per unit standard for bedside evaluation, Notify attending physician, Discuss treatment plan with team, Increase frequency of vital signs/CHEWS/assessments, Document interventions and notifications

Student Name: Arian Tagle Unit: _____ Pt. Initials: 81 Date: _____

Allergies: NKDA

Pediatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

57.6 kg

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
D5NS KCL20	Isotonic/ Hypotonic/ Hypertonic	Fluid replacement	CMP	hyperglycemia

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range? Is med in therapeutic range? If not, why?	IVP – List diluent solution, volume, and rate of administration IVPB – List concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
Acetaminophen	analgesic	Pain	PO 450mg QID			hepatoxicity anemia nausea rash constipation	1. report change in bowel habits 2. report N/V 3. report sudden rash 4. report S/S of yellow skin or stool
Cefdinir	Anti biotic	Fight infection	PO 300mg BID			cdiff anemia thrombo-cytopenia HA	1. report change in BM 2. report loose frequent stools 3. report stomach pain 4. report HA
clobazam	sedative	help sleep / seizure	PO 10mg Nightly			Abuse dependance suicide sedation	1. report change in LOC 2. report suicidal ideations 3. report morbid thoughts 4. report dependence
clonaze-pam	sedatives	relax / seizure	PO 1mg BID			Abuse dependence suicide sedation	1. report change in LOC 2. report suicial ideations 3. report morbid thoughts 4. report drug dependence
etho-suximide	sedatives	relax / seizure	PO 250mg BID			anorexia wt. loss abd. pain diarrhea	1. report wt. loss <2 lb a day 2. report change in appetite 3. report diarrhea 4. report stomach pain

Adopted: August 2016

Student Name: _____ Unit: _____ Pt. Initials: _____ Date: _____

Pediatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

Allergies: _____

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range? Is med in therapeutic range? If not, why ?	IVP – List solution to dilute and rate to push. IVPB – concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
famotidine (Pepcid)	Antiacid	treat GERD	PO 20mg BID			seizures dizziness HA taste change	1. call if LOC change 2. call before fall 3. report HA 4. appetite may change
Ibuprofen (ADVIL)	Anti-inflam.	Fever, Pain	PO 400 Q6			bleed ulcer, anemia dizzy	1. report bleeding gums 2. report bleeding nose 3. report bruises 4. call before fall
Ondansetron Zofran	Anti emetics	Nausea	IVP 4mg Q8		4mg/2mg/1mL 5mins	HA hypoxia dizziness agitation	1. report HA 2. Monitor O2 <90 3. call before fall 4. monitor change in affect
ondansetron Zofran	Anti emetics	Nausea	PO 4mg Q8			HA hypoxia dizziness agitation	1. report HA 2. monitor O2 <90 3. call before fall 4. Monitor affect
Lorazepam	Sedative	relax / seizure	IVP 4mg 5mins	2.85-4mg yes	2.88-4mg yes NS/ 5mins	addiction depression tachycardia dizziness	1. report HA 2. report sedation 3. report stomach ache 4. call before fall

PRN seizures

Adopted: August 2016