

**IM5 (Pediatrics) Critical Thinking Worksheet****Patient Age:** 36 wk, 2d**Patient Weight:** 2.503 kg

<b>Student Name:</b> Adelita Reyna	<b>Unit:</b> NICU <b>Pt. Initials:</b> M.M	<b>Date:</b> 6-8-22
<b>1. Disease Process &amp; Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</b> Fetal Anemia with isoimmunization occurs when the amount of circulating blood cells and hemoglobin in a fetus fall below normal levels because not enough blood cells are being produced or because they are being destroyed faster than they can be made. Isoimmunization is a condition that happens when a pregnant woman's blood is incompatible with the baby's, causing her immune system to react and destroy the baby's blood cells. (UCSF "Fetal Anemia", n.d.)	<b>2. Factors for the Development of the Disease/Acute Illness:</b> <ul style="list-style-type: none"><li>❖ Alloimmunization</li><li>❖ Maternal infections: Parvovirus</li><li>❖ Blood loss from fetal circulation</li><li>❖ Maternal blood type A+</li><li>❖ Fetal blood type A+ Anti E, DAT+</li></ul>	<b>3. Signs and Symptoms:</b> <ul style="list-style-type: none"><li>❖ Jaundice</li><li>❖ Poor weight gain</li><li>❖ Reflux</li><li>❖ Weak swallow</li><li>❖ Respiratory distress</li><li>❖ Bloody stool</li><li>❖ Fatigue</li></ul>

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<b>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</b> <ul style="list-style-type: none"> <li>❖ CBC, CPM, TsB, TcB, Bilirubin</li> <li>❖ Antibody screening, DAT, IGG, ABO Rh</li> <li>❖ KUB</li> <li>❖ Prenatal ultrasound</li> <li>❖ Maternal blood sampling</li> <li>❖ CXR</li> <li>❖ Amniocenteses</li> <li>❖ Fetal blood sampling</li> <li>❖ PKU: Pending</li> <li>❖ HHR</li> </ul>	<b>5. Lab Values That May Be Affected:</b> <ul style="list-style-type: none"> <li>❖ CBC, CPM, TsB, TcB, Bilirubin</li> <li>❖ Antibody screening, DAT, IGG, ABO Rh</li> <li>❖ Maternal blood sampling</li> <li>❖ Amniocenteses</li> <li>❖ Fetal blood sampling</li> <li>❖ PKU: Pending</li> </ul>	<b>6. Current Treatment (Include Procedures):</b> <ul style="list-style-type: none"> <li>❖ Comfort Measures: Pacifier, Swaddle</li> <li>❖ Activity: Rest and Grow</li> <li>❖ Right NG 6.5 Fr @18 cm placed on 6/2</li> <li>❖ Gavage: Mom's milk 45 mL over 30 minutes</li> <li>❖ NPO: 5/26-6/2/22 (for suspicion of NEC)</li> <li>❖ Monitor vitals, Pt on RA</li> <li>❖ Cluster Care Q4H</li> <li>❖ Feedings 8, 11, 2, 5</li> <li>❖ Transfusion of PRBCs 46 mL (BT x2) <ul style="list-style-type: none"> <li>o 5/27 and 6/7</li> </ul> </li> <li>❖ Double phototherapy</li> <li>❖ Open Crib/Basinet</li> <li>❖ Zosyn given for 7 days (for suspicion of NEC)</li> <li>❖ PICC Left calf with NS @ 1 mL/hr</li> </ul>
<b>7. Pain &amp; Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain &amp; Discomfort for This Patient.</b>  1.  2.  <b>*List All Pain/Discomfort Medication on the Medication Worksheet</b> Click here to enter text.	<b>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</b>   <b>Actual Pt MIVF Rate:</b>  <b>Is There a Significant Discrepancy?</b> <input type="text"/>  <b>Why?</b>	<b>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</b>   <b>Actual Pt Urine Output:</b>

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	<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>	
<b>11. Focused Nursing Diagnosis:</b>	<p><b>15. Nursing Interventions related to the Nursing Diagnosis in #11:</b></p> <p>1.</p> <p><b>Evidenced Based Practice:</b></p> <p>2.</p>	<p><b>16. Patient/Caregiver Teaching:</b></p> <p>1.</p> <p>2.</p> <p>3.</p>
<b>12. Related to (r/t):</b>	<p><b>Evidenced Based Practice:</b></p> <p>3.</p> <p><b>Evidenced Based Practice:</b></p>	

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<b>13. As evidenced by (aeb):</b>		<b>17. Discharge Planning/Community Resources:</b> 1. 2. 3.
<b>14. Desired patient outcome:</b>		