

## Pediatric Case 3: Eva Madison

### Documentation Assignments

1. Document your initial focused assessment of Eva Madison.
  - a. Oral mucosa -dry
  - b. Skin turgor – tenting
  - c. Lung sounds clear bilaterally
  - d. Respirations- 29
  - e. O2 sat- 97
  - f. Pain-4
  - g. Breath sounds clear bilaterally
  - h. BP-81/64 mm Hg
  - i. Temp- 99
  - j. HR – 189- tachycardia
  
2. Identify and document key nursing diagnoses for Eva Madison.
  - a. Risk for insufficient fluid volume due to vomiting and diarrhea
  - b. Risk for electrolyte imbalance due to vomiting and diarrhea
  
3. Referring to your feedback log, document the nursing care you provided and Eva Madison's response.
  - a. I introduced myself
  - b. Identified the relatives
  - c. Identified the pt
  - d. Washed hands
  - e. Asked for allergies
  - f. Checked BP
  - g. Attached continuous pulse ox
  - h. Assessed respirations
  - i. Assessed pain with FACES
  - j. Assessed mucous membranes
  - k. Assessed for tenting
  - l. Assessed IV site
  - m. Started Infusion as ordered
  - n. Obtained stool sample
  - o. Obtained urine sample
  - p. Listened to lungs
  - q. Measured temp
  - r. Reassessed BP

- s. Provided pt education
  - t. Provided parent education
  - u. **SHOULD have reassessed breathing at this point**
  - v. Phoned provider
  - w. PT handoff
4. Document the patient teaching that you would provide for Eva Madison and her parents before discharge, including teaching related to contact isolation precautions and diet progression.
- a. I would have taught the pt and her mother about diet changes to prevent progression of dehydration. The pt would need a electrolyte rehydration solution in small amounts and when she is ready to progress to a regular diet that is the goal. (Younger children need more electrolytes) I would also teach that contact precautions are in place because the source of the pt GI issues has not been determined. (The pt could have C.Diff)