

IM5 (Pediatrics) Critical Thinking Worksheet

Patient Age:

Patient Weight: 17.25kg

Student Name:

Unit: *pf*

Pt. Initials: *394*

Date: [Click here to enter a date.](#)
10/4/22

<p>1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference): <i>Respiratory Syncytial Virus (RSV) / Bronchiolitis - acute viral inflammation of the lower resp. tract involving bronchioles & alveoli. Thick mucus accumulates & obstructs smaller airways.</i></p>	<p>2. Factors for the Development of the Disease/Acute Illness: <i>- childcare attendance - prematurity - weakened immune sys. - fam hx of asthma asthma</i></p>	<p>3. Signs and Symptoms: <i>- fever - cough - tachypnea - retractions - wheezing</i></p>
<p>4. Diagnostic Tests Pertinent or Confirming of Diagnosis: <i>- antigen detection - culture tests - chest x-ray</i></p>	<p>5. Lab Values That May Be Affected: <i>ABGs, Pulse ox reading, WBC count</i></p>	<p>6. Current Treatment (Include Procedures): <i>- analgesics - antipyretics - O₂ admin & O₂ sat monitoring</i></p>

<p>Student Name:</p>	<p>Unit: Pt. Initials:</p>	<p>Date: Click here to enter a date.</p>
<p>7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient.</p> <p>1. Body position to promote chest expansion</p> <p>2. Distraction w/ music or toys</p> <p>* List All Pain/Discomfort Medication on the Medication Worksheet</p> <p>Click here to enter text.</p>	<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</p> $100 \times 10 \text{ kg} = 1000$ $50 \times 7.25 \text{ kg} = 362.5$ $= 1362.5 / \text{day}$ $\div 24 = 57 \text{ mL/hr}$ <p>Actual Pt MIVF Rate: 0, IV is INT</p> <p>Is There a Significant Discrepancy? yes</p> <p><input type="button" value="Choose an Item"/></p> <p>Why? maybe the doctor believes they're adequately maintaining the fluid w/o the need of IVF.</p>	<p>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</p> 1 mg/kg/hr $1 (17.25) / \text{hr}$ $= 17.25 \text{ mL/hr}$ <p>Actual Pt Urine Output: unknown because parent changed & threw away diaper before measurement but he had one wet diaper during my shift with him</p>
	<p>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:</p> <p>Erickson Stage: Trust vs. mistrust</p> <p>1. Patient would become more calm when his dad would touch him or give him his pacifier.</p> <p>2. Patient exhibits total concern for self when assessments are being performed and he would be easily upset</p> <p>Piaget Stage: sensory motor period</p> <p>1. Patient exhibits stranger anxiety when he's awake.</p> <p>2. Patient would cry and move leg when he saw me grab the blood pressure cuff from the bed for his vital signs.</p>	

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<p>11. Focused Nursing Diagnosis: Fluid volume deficit</p>	<p>15. Nursing Interventions related to the Nursing Diagnosis in #11: 1. Create an intake schedule based on minimum fluid requirement volume. Evidenced Based Practice: Infants require help w/ maintaining hydration, following a schedule helps meet fluid goal. 2. Provide comfortable environment while keeping patient cool. Evidenced Based Practice: Trying to minimize further fluid loss from sweating. 3. maintain oral hygiene.</p>	<p>16. Patient/Caregiver Teaching: 1. Teach parents importance of good hand hygiene. 2. Breastfeeding is helpful in the prevention of RSV. 3. Avoid cigarette smoke exposure.</p>
<p>12. Related to (r/t): decreased fluid intake</p>	<p>Evidenced Based Practice: mouth care reduces the discomfort of dry mucous membranes.</p>	<p>17. Discharge Planning/Community Resources: 1. Have case manager find resources to help cover costs of home meds. 2. Give parents a journal/chart to help track/prevent dehydration. 3. Show parents how to use pulse ox & evaluate teaching by having them perform it back.</p>
<p>13. As evidenced by (a/e/b): pt only had 120 ml of PO intake over 7 hrs & parents reported he wasn't eating as much as usual</p>		
<p>14. Desired patient outcome: Patient will increase intake to 120ml every four hours by discharge</p>		