

Student Name Alexa Pagano

7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient.

1. Therapeutic hugging - involving parents to provide comfort & sense of control
2. Distraction

\*List All Pain/Discomfort Medication on the Medication Worksheet

- Ondansetron
- Acetaminophen

<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work):          Patient Wt: <u>15</u> kg  <math>10 \text{ kg} \times 100 = 1,000</math>  <math>5 \text{ kg} \times 50 = \frac{250}{+}</math>  <math>1,250 \text{ mL}/24\text{hr} = 52 \text{ mL/hr}</math>          Calculated Fluid Requirement: <u>52</u> mL/hr          Actual Pt MIVF Rate: <u>    </u> mL/hr          Is There a Significant Discrepancy?  <u>    </u>          Why?  <u>    </u></p>	<p>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):          4yrs old: <math>0.5 \text{ mL}/\text{kg}/\text{hr}</math>  <math>0.5 \text{ mL} (15 \text{ kg}) = 7.5 \text{ mL}/\text{hr}</math>          Calculated Min. Urine Output: <u>7.5</u> mL/hr          Actual Pt Urine Output: <u>    </u> mL/hr</p>
<p>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:          Patient age: <u>4</u> yrs</p> <p>Erickson Stage: Initiative vs. Guilt          1. The child initiated coloring a picture, but did not complete it          2. The child asked on intrusion and took my stethoscope out of my hands out of curiosity</p> <p>Playlet Stage: Preoperational period          1. The child feared that the snail she needed would kill her          2. The child spoke to the doll as if it were a real person</p>	

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<p><b>11. Focused Nursing Diagnosis:</b></p> <ul style="list-style-type: none"><li>• Immunosuppression - patient is at high risk for developing infections and will have difficulty fighting off due to WBC/neutrophils from chemotherapy being diminished</li></ul>	<p><b>15. Nursing Interventions related to the Nursing Diagnosis in #11:</b></p> <ol style="list-style-type: none"><li>1. Handwashing Evidenced Based Practice: (DC states handwashing prevents illness and spread of infections)</li><li>2. Warning equipment (ex: stethoscope) Evidenced Based Practice: (DC states disinfection and sterilization reduces rates of health-care associated infections)</li><li>3. Wearing gloves/mask Evidenced Based Practice: (DC states the use of PPE assists in infection control and safety)</li></ol>	<p><b>16. Patient/Caregiver Teaching:</b></p> <ol style="list-style-type: none"><li>1. S/S of infection: fever, at surgical sites; redness, swelling, edema</li><li>2. Teach care of any ports or permanent central line sites</li><li>3. Stay away from large crowds, ensure siblings / friends / family are not sick</li></ol>
<p><b>12. Related to (r/c):</b></p> <ul style="list-style-type: none"><li>• Chemotherapy</li><li>• Radiation therapy</li><li>• Surgery (hepatectomy)</li></ul>		
<p><b>13. As evidenced by (a/e/b):</b> Breast cancer. Org: (chemotherapy causes immunosuppression because it targets rapidly dividing cells, cancer cells, but also normal cells or healthy cells)</p>		<p><b>17. Discharge Planning/Community Resources:</b></p> <ol style="list-style-type: none"><li>1. Go to doctor for any S/S of infection</li><li>2. Balance rest and activity</li><li>3. Support groups - family to family</li></ol>
<p><b>14. Desired patient outcome:</b></p> <ul style="list-style-type: none"><li>• Stay as healthy as possible while the body is healing from treatment. NO infections</li></ul>		

Student Name: ALEX Paganò

Unit: ---

Pt. Initials: ---

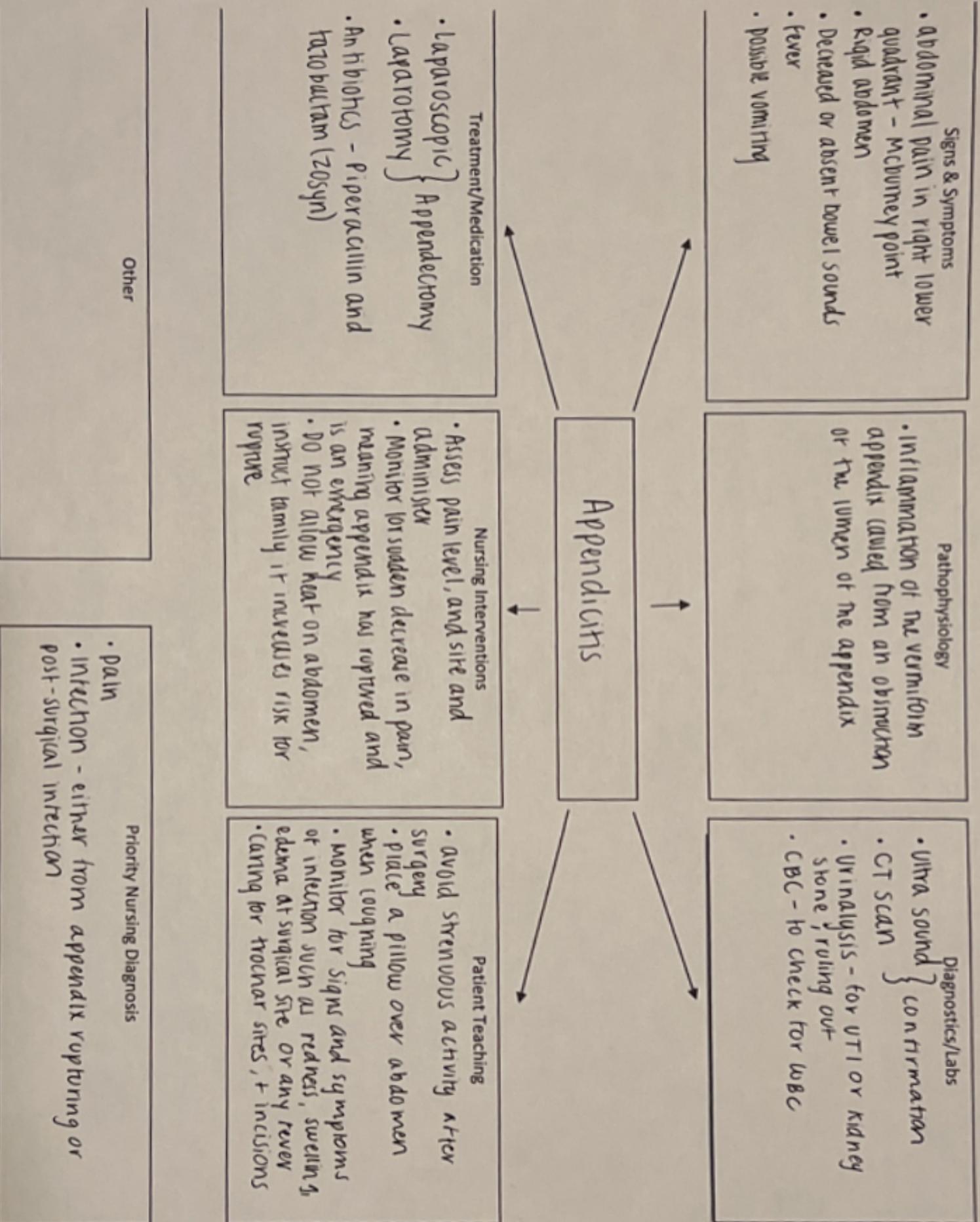
Date: 1/25/23

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

Allergies: ---

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

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?		IVF – List diluent solution, volume, and rate of administration	NVS – List concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
				Is med in therapeutic range?	If not, why?				
Ondansetron (Zofran)	5HT3 receptor antagonists	Nausea and vomiting	PO	yes		---	---	<ul style="list-style-type: none"> <li>• blurred vision or temporary vision loss</li> <li>• may impair reactions</li> </ul>	<ol style="list-style-type: none"> <li>1. Monitor for constipation, ITO's</li> <li>2. Monitor for jaundice (yellowing of eyes)</li> <li>3. Assess for allergies, any allergic reaction to med</li> <li>4. Watch for dizziness, call don't fall</li> </ol>
Acetaminophen	Analgesic	FEVER REDUCER	PO NO MORE THAN 5 doses in 24hrs	yes		---	---	<ul style="list-style-type: none"> <li>• Liver toxicity: jaundice, dark urine, lethargy or itching</li> </ul>	<ol style="list-style-type: none"> <li>1. NO MORE THAN 5 doses in 24 hours</li> <li>2. Monitor SIS of liver toxicity</li> <li>3. Only take when necessary, for fever etc.</li> <li>4. Ask parent history with use of med + reaction</li> </ol>
									<ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> </ol>



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7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient.

1. Distraction - moves, games
2. Music Therapy

\*List All Pain/Discomfort Medication on the Medication Worksheet  
 • Acetaminophen

<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work):          Patient Wt: <u>24</u> kg  <math>10 \text{ kg} \times 100 = 1,000</math>  <math>10 \text{ kg} \times 50 = 500</math>  <math>4 \text{ kg} \times 20 = \frac{80}{1,580 \text{ mL}/24 \text{ hr}} \rightarrow 65.8</math>  <math>\downarrow</math>  <math>\downarrow</math>          Calculated Fluid Requirement: <u>66</u> mL/hr          Actual Pt MIVF Rate: <u>    </u> mL/hr          Is There a Significant Discrepancy?  <u>    </u>          Why?  <u>    </u></p>	<p>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):          8 yrs old: <math>0.5 \text{ mL/kg/hr}</math>  <math>0.5 \text{ mL} (24 \text{ kg}) = 12 \text{ mL/hr}</math>          Calculated Min. Urine Output: <u>12</u> mL/hr          Actual Pt Urine Output: <u>    </u> mL/hr</p>
<p>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:          Patient age: <u>8</u> yrs          Erickson Stage: Industry vs. Inferiority          1. The child played a video game, on his ipod, and explained to me how to play          2. The child got upset when he could not successfully complete his math homework          Piaget Stage: Concrete operational period          1. The child collected not messes and had some at bedside          2. The child kept telling me jokes, and had a sense of humor</p>	

Student Name Alexa Paqano

<p><b>11. Focused Nursing Diagnosis:</b></p> <ul style="list-style-type: none"> <li>• Pain - abdominal pain in the right lower quadrant (McBurney point)</li> </ul>	<p><b>15. Nursing Interventions related to the Nursing Diagnosis in #11:</b></p> <ol style="list-style-type: none"> <li>1. Administer pain medications</li> </ol> <p>Evidenced Based Practice: health haid: - The peritonium is irritated causing localized, sharp pain</p> <ol style="list-style-type: none"> <li>2. Use of non-pharmacologic measures: games or music etc.</li> </ol> <p>Evidenced Based Practice: drug-com: - Nonpharmacologic measures such as music trigger the body to release endorphins</p> <ol style="list-style-type: none"> <li>3. Involving parents in care and comfort</li> </ol> <p>Evidenced Based Practice: (center for healthjournalism). - Evidence shows that children who had their parents involved in care in hospital showed fewer negative behaviors, less hyperactivity and greater ability to adapt</p>	<p><b>16. Patient/Caregiver Teaching:</b></p> <ol style="list-style-type: none"> <li>1. Inclusion site care - Trocar sites for laparoscopy</li> <li>2. S/S + infection</li> <li>3. Follow up outpatient visit in 2-4 weeks to examine the wound + evaluate recovery</li> </ol>
<p><b>12. Related to (r/t):</b></p> <ul style="list-style-type: none"> <li>• Inflammation of the Vermiform appendix</li> </ul>		
<p><b>13. As evidenced by (a/e/b):</b></p> <ul style="list-style-type: none"> <li>• health haid: - as the appendix becomes swollen and inflamed, it irritates the peritonium which causes the localized, sharp pain, which is constant and severe</li> </ul>		<p><b>17. Discharge Planning/Community Resources:</b></p> <ol style="list-style-type: none"> <li>1. Call the doctor for any S/S + infection</li> <li>2. Rest for as many days as necessary, instructed by physician</li> <li>3. Return to school, again + begin activities when feeling better</li> </ol>
<p><b>14. Desired patient outcome:</b></p> <ul style="list-style-type: none"> <li>• pain relief and prevention of rupturing appendix</li> </ul>		

Student Name: Alexa Pagano

Unit:                     

Pt. Initials:                     

Date: 1/26/23

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

Allergies:                     

Primary IV Fluid and Infusion Rate (mL/hr)	Circle IV Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
—	Isotonic/Hypotonic/Hypertonic	—	—	—

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?		IVF – List diluent solution, volume, and rate of administration NVP – List concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
				Is med in therapeutic range?	If not, why?			
Piperacillin and tazobactam (Zosyn)	Beta-lactamase inhibitors	Antibiotic to treat infection	IV	Yes		IVP —	<ul style="list-style-type: none"> <li>• Confusion and seizure</li> <li>• Low potassium level</li> </ul>	<ol style="list-style-type: none"> <li>1. Assess for previous reactions to penicillin</li> <li>2. diarrhea, watery or bloody, call doctor</li> <li>3. May cause nausea, headache &amp; insomnia</li> <li>4. Report any muscle twitching, stiffness</li> </ol>
Acleraminopron	Anaesthetic	Fever reducer	PO NO MORE THAN 5 DOSES IN 24 HRS	Yes		—	<ul style="list-style-type: none"> <li>• Liver toxicity</li> <li>• jaundice, dark urine, lethargy, itching</li> </ul>	<ol style="list-style-type: none"> <li>1. NO MORE THAN 5 DOSES IN 24 HRS</li> <li>2. Monitor for SIS of liver toxicity</li> <li>3. Only take when needed for fever</li> <li>4. Ask parent's history with drug, + reactions</li> </ol>
								<ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> </ol>
								<ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> </ol>