

I have continued to learn a lot during the second half of my preceptorship! The last couple of weeks in the PICU have been rough because the unit has had a lot of hard patients. There is one that I had for three days that I learned a lot from and has made a great impact.

KUK was an 8-week year old male who was diagnosed with strep mitis and strep gordonii. Unfortunately, he became septic because of the two strands. I had this patient on three separate shifts. He had necrotizing skin on his right leg and right cheek that spread by the third day that I had him. He was intubated, had an OG tube, and a peritoneal drain. He also had a right femoral art line attached to the CRRT machine and on ECMO. His case was very complicated and had a lot of layers to it.

The first thing I learned about was methylene blue and how it turns your urine blue. When I walked in and saw that for the first time, I was shocked. He also had the drain that was draining yellow clear fluid. On the first day, we were replacing that fluid we were losing with Albumin at a 1:1 ratio. He had 8 drips running through his art line and the ECMO circuit. Midge gave me a rundown about the ECMO circuit which was interesting to learn about. I also learned a lot about the CRRT machine. The first day we had him, I observed everything, but I was put in charge of calculating how much we need to pull out based on the I&Os by the second day.

Although I learned a lot about this patient, he was also a sad case, and it caused some emotional exhaustion. The first day we had him, he was somewhat stable. He kept us busy because we had a lot of meds in the morning and had to replace platelets twice and RBC's once. Other than that, nothing too crazy happened but we knew that he was not in good condition because of what was happening, but also since he had a very similar story to two other patients that we have had before. The second day was a little bit harder. His peritoneal drain had fallen out during the night shift and Dr. Anand said that he wouldn't replace it unless he got distended. There were three separate occasions that he started crashing. We didn't have to code him, but we had to increase the EPI and start taking precautions. Halfway through the shift, Dr. Barton decided that he wanted to do a replacement transfusion and we started the process of giving him almost 400 mL of blood. They finished giving it to him over night shift that second night. I didn't have him again for a week, and that was a rough shift. When I came back yesterday (4/18) for my half shift, he kind of looked better. His skin looked a lot better, they were weaning down on the drips, and they didn't have to replace anything during the first half of the shift. However, he started getting more distended in the afternoon. Dr. Barton decided to put the peritoneal drain back in, and when he did, we pulled out over 300 mL of blood, and he started crashing again. We got him stable again, and after the initial output, he stopped bleeding

for about two hours. It drained 150 mL again, so Dr. Barton did an ultrasound. He figured out that the bleeding was coming from his liver. During shift change, Dr. Barton put in a second drain, and he kept bleeding in the evening. At around midnight last night, the family decided to withdraw care and he passed within a few minutes.

It's been emotionally draining to be a part of this case. I have been up here during a death of a child while working up here before and have been a part of a few codes. However, those times occurred while I was a tech, so I haven't gotten attached to those patients. Being actively involved in this patient's case made it difficult to see this happening to him. It was also difficult seeing his mom crying and understandably upset. I tried to console her a little bit, but I didn't know exactly what to say or do to comfort her at least a little. It was a good learning experience overall, but I was emotional after each shift with him. It gives me peace knowing that he is no longer in pain and that we did everything that we could do for him and his family.