Pediatric ED Reflection Questions

1. What types of patients (diagnoses) did you see in the PED?

    - **Flu symptoms (fever), constipation, hip injury, hand, foot, and mouth, staple removal, arm pain, allergic reaction (peanuts → EpiPen), radius ulnar fracture**
2. The majority of the patients who came into the PED were from which age group? Was this what you expected?

    - **The majority of the patients were from the school-age group. This was honestly what I did expect because I was thinking a lot of injuries that may happen would be at school.**
3. Was your overall experience different than what you expected? Please give examples.

    - **My experience was not really what I expected. I knew there probably was not going to be any seriously traumatic cases come in on my shift, but I thought it would be a little busier than it was. We pretty much sat there the entire day, only triaging a few patients that were not high acuity. Towards the end, it got more exciting because we got to observe the little boy with the arm fracture. My nurse that I was with did tell me that how busy it is depends on the day. I know it will ramp up soon with respiratory issues in the winter months.**
4. How did growth and development come into play when caring for patients (both in triage and in treatment rooms)?

    - **In both the triage and treatment rooms, the nurse made sure to use language that was developmentally appropriate. The growth and development of each patient was evident in the way they interacted with the nurse. Some of the patients were extremely shy and others were more talkative. The parents were always in the room with the patient, which I could definitely tell helped calm their nerves.**
5. What types of procedures did you observe or assist with?

    - **The procedure I got to observe was the doctors pushing a little boy's broken arm back in place. I watched him get put under anesthesia, his arm pushed back straight into place, and them wrap the cast on him. The only other thing I got to assist with was vital signs.**
6. What community acquired diseases are trending currently?

    - **Rhinovirus, adenovirus, pneumonia, covid**
7. What community mental health trends are being seen in the pediatric population?

    - **Anxiety, depression, suicidal ideation**

8. How does the staff debrief after a traumatic event? Why is debriefing important?

    - **After a seriously traumatic event, the entire staff involved will get together and discuss the event. This will include the doctors, nurses, child life, and anyone else who was involved or needs to be included in the debrief. This is important so that they can discuss what went well in the event and what they could have done better. It helps the entire team get on the same page of what happened and discuss how they would do things differently in the future.**

9. What is the process for triaging patients in the PED?

    - **They call the patients back, triage them, rate their acuity, and take them to a room if needed.**

10. What role does the Child Life Specialist play in the PED?

    - **Child Life helps with explaining procedures to young patients that may not understand what is going on. Also, they play a big part in distracting the patient while something scary or painful is going on. I got to watch Child Life interact with the little boy with the broken arm. She first used a stuffed animal to describe what they were going to do to fix his arm and used developmentally appropriate language. She then distracted him with a video while the nurses started an IV. I definitely thought it was interesting to watch. It seemed to help the little boy understand more of what was going on and he appeared more at ease.**