

Pediatric ED Reflection Questions

1. What types of patients (diagnoses) did you see in the PED?
 - I noticed that we had many come in for cough, sore throat, and runny nose. Some ended up being Flu, but others were negative for everything, and we sent them home.
2. The majority of the patients who came into the PED were from which age group? Was this what you expected?
 - Most of the patients I saw were between the ages of 8 to 16 years old. I was not expecting to see very many teenagers, I initially thought I would see many from the ages of 2 to 8 years old.
3. Was your overall experience different than what you expected? Please give examples.
 - I expected to see lots of crying children due to starting IVs, getting nasal and throat swabs, and giving medications. However, I did not think it would be as slow as it was that day, but I was impressed by the way they included atraumatic care methods when starting IVs.
4. How did growth and development come into play when caring for patients (both in triage and in treatment rooms)?
 - I could see how Piaget's cognitive theory of development goes into play when preparing to start an IV on a 6-year-old patient. The magical thinking helped to calm her down when the nurse started the IV.
5. What types of procedures did you observe or assist with?
 - I observed a nurse access a Port-a-Cath. I noticed they used a LAT cream 30 min before they started the procedure, and I went with the nurse to grab all the necessary supplies.

She walked the patient through the whole procedure, giving her the option of whether she wanted to count or not, and then proceeded to insert the needle into the port.

6. What community acquired diseases are trending currently?

- Measles is the disease that is currently trending in the community at the moment, due to a decrease in infants receiving the vaccination.

7. What community mental health trends are being seen in the pediatric population?

- The trend that has been most prominent recently has been depression and suicidal ideation. While I was there, we did have a patient come in for suicidal ideation, and I observed the admission.

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

- After a traumatic event, the staff talks about how they feel about the event and what they need in that moment. Debriefing is important because the staff gets a chance to express how they feel and don't feel the need to take that home with them. It also helps for future events in case there were mistakes made.

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

- When triaging a patient, you assess the severity of their trauma or illness and how quickly they will need treatment. This is where the "ABCs," or airway breathing and circulation, come into hand for accessing severity. Based on the assessment from the nurse, the patient will then get a score from 1, worst, through 5, best, on how severe the patient is.

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

- I did not see the Child Life Specialist while I was in the ED. However, I think it would have been beneficial for some kids to feel at peace while waiting for lab results or getting

medications. Having some toys or something to distract them other than the TV would have made them feel better.