Pediatric Floor Patient #1

ENERAL APPEARANCE
rance: ☒ Healthy/Well Nourished
eat/Clean ☐ Emaciated ☐ Unkept
opmental age:
lormal ☐ Delayed

NEUROLOGICAL
: ☐ Alert ☐ Confused ☒ Restless
☐ Sedated ☐ Unresponsive
ented to:
☐ Person ☐ Place ☐ Time/Event
☒ Appropriate for Age
upil Response: ☒ Equal ☐ Unequal
☒ Reactive to Light ☐ Size 3mm
ontanel: (Pt < 2 years) ☐ Soft ☐ Flat
☐ Bulging ☐ Sunken ☐ Closed
Extremities:
☒ Able to move all extremities
☐ Symmetrically ☐ Asymmetrically
Grips: Right 5 Left 5
Pushes: Right 5 Left 5
S=Strong W=Weak N=None
EVD Drain: ☐ Yes ☒ No Level ____
Seizure Precautions: ☒ Yes ☐ No

RESPIRATORY
Respirations: ☒ Regular ☐ Irregular
☐ Retractions (type) ____
☐ Labored
Breath Sounds:
Clear ☒ Right ☒ Left
Crackles ☐ Right ☐ Left
Wheezes ☐ Right ☐ Left
Diminished ☐ Right ☐ Left
Absent ☐ Right ☐ Left
☒ Room Air ☐ Oxygen
Oxygen Delivery:
☐ Nasal Cannula: ____L/min
☐ BiPap/CPAP: ____
☐ Vent: ETT size____@____cm
☐ Other: ____
Trach: ☐ Yes ☒ No
Size ____ Type ____
Obturator at Bedside ☐ Yes ☐ No
Cough: ☒ Yes ☐ No
☒ Productive ☐ Nonproductive
Secretions: Color white
Consistency ____
Suction: ☒ Yes ☐ No Type ____
Pulse Ox Site on big toe of R foot
Oxygen Saturation: 99%

CARDIOVASCULAR
Pulse: ☒ Regular ☐ Irregular
☐ Strong ☐ Weak ☐ Thready
☐ Murmur ☐ Other ____
Edema: ☒ Yes ☐ No Location ____
☒ 1+ ☐ 2+ ☐ 3+ ☐ 4+
Capillary Refill: ☒ < 2 sec ☐ > 2 sec
Pulses:
Upper R 3+ L 3+
Lower R 2+ L 2+
4+ Bounding 3+ Strong 2+ Weak
1+ Intermittent 0 None

ELIMINATION
Urine Appearance: yellow
Stool Appearance: brown white
☐ Diarrhea ☐ Constipation on suppt
☐ Bloody ☐ Colostomy

GASTROINTESTINAL
Abdomen: ☒ Soft ☐ Firm ☐ Flat
☐ Distended ☐ Guarded
Bowel Sounds: ☒ Present X 4 quads
☐ Active ☐ Hypo ☐ Hyper ☐ Absent
Nausea: ☐ Yes ☒ No
Vomiting: ☐ Yes ☒ No
Passing Flatus: ☐ Yes ☒ No
Tube: ☒ Yes ☐ No Type NG
Location L nasal Inserted to 35 cm
☐ Suction Type: ____

NUTRITIONAL
Diet/Formula: pediasure
Amount/Schedule: n/a
Chewing/Swallowing difficulties:
☐ Yes ☒ No

MUSCULOSKELETAL
☐ Pain ☐ Joint Stiffness ☐ Swelling
☐ Contracted ☐ Weakness ☐ Cramping
☐ Spasms ☐ Tremors
Movement:
☐ RA ☐ LA ☐ RL ☐ LL ☒ All
Brace/Appliances: ☐ None
Type: ____

MOBILITY
☐ Ambulatory ☐ Crawl ☒ In Arms
☐ Ambulatory with assist ____
Assistive Device: ☐ Crutch ☐ Walker
☐ Brace ☐ Wheelchair ☐ Bedridden

PSYCHOSOCIAL
Social Status: ☐ Calm/Relaxed ☐ Quiet
☐ Friendly ☐ Cooperative ☒ Crying
☒ Uncooperative ☒ Restless
☒ Withdrawn ☒ Hostile/Anxious
Social/emotional bonding with family:
☒ Present ☐ Absent

IV ACCESS
Site: Left arm ☐ INT ☐ None
☐ Central Line
Type/Location: ____
Appearance: ☒ No Redness/Swelling
☐ Red ☐ Swollen
☐ Patent ☐ Blood return
Dressing Intact: ☒ Yes ☐ No
Fluids: ____

SKIN
Color: ☐ Pink ☐ Flushed ☐ Jaundiced
☐ Cyanotic ☐ Pale ☒ Natural for Pt
Condition: ☒ Warm ☐ Cool ☐ Dry
☐ Diaphoretic
Turgor: ☒ < 5 seconds ☐ > 5 seconds
Skin: ☒ Intact ☒ Bruises ☐ Lacerations
☐ Tears ☐ Rash ☐ Skin Breakdown
Location/Description: bilaterally "love hand area"
Mucous Membranes: Color: ____
☐ Moist ☐ Dry ☐ Ulceration

PAIN
Scale Used: ☐ Numeric ☒ FLACC ☐ Faces
Location: ____
Type: ____
Pain Score:
0800 ____ 1200 ____ 1600 ____

WOUND/INCISION
☒ None
Type: ____
Location: ____
Description: ____
Dressing: ____

TUBES/DRAINS
☒ None
☐ Drain/Tube
Site: ____
Type: ____
Dressing: ____
Suction: ____
Drainage amount: ____
Drainage color: ____