

Pediatric ED Reflection Questions

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

The first patient I saw was a possible allergic reaction to a medication (Zofran). The next patient was a patient that had multiple seizures within the week and was told by another clinic to come to the emergency department. Our last patient was a possible pancreatitis patient and was getting lab work done before we left.

2. The majority of the patients who came into the PED were from which age group? Was this what you expected? There was a wide range in the ages that we saw in patients, from 15 months to 18 years of age. Yes, just due to it being a children's emergency department. I expected it to be like the adult emergency department.

3. Was your overall experience different than what you expected? Please give examples.

I would say yes and no. I did expect it to be livelier and busier with patients, especially since the students that were there the previous day had a very busy day, I just expected it to be the same. I did expect to see a wide range of disease processes and different reasonings why patients came to the emergency department so that was the same.

4. How did growth and development come into play when caring for patients (both in triage and in treatment rooms)? In triage when I saw the 15-month-old cling to her mother when she first came in and when we had to weigh her, she cried (separation anxiety) being away from her mom. She also would cry no to everything we did on her including temperature and blood pressures.

5. What types of procedures did you observe or assist with? I assisted in vital signs and looking at patients' charts.

6. What community acquired diseases are trending currently? The majority was respiratory disease however, we got to see a lot of different disease processes while in the emergency department.

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

We didn't get to see any mental health patients while in the pediatric emergency department.

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

The only type of debrief I saw was after the front desk worker was done asking questions and documenting she would debrief with the nurse on what was going on. Then after the nurse was done getting information from the patient and vital signs they would go debrief to the physician. I believe it is important so that way everyone was on the same page and there would be no miscommunication between the staff.

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

The process was after the front desk worker got the information she needed from the patient and the patient's guardian the nurse would bring back the patient. The nurse would then get the patient's height and weight. Then the nurse would take them to one of the triage rooms and grab the patient's vital signs and then would ask what brought them to the emergency department. After they had heard what the patient brought, the nurse would then document their findings and would take them to another room. Once the patient was in their room the nurse would then take the paperwork to the physician and inform them what was going on.

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

Child Life was important in the PED especially when it came to the patient who was 15 months old, and we had to get labs from this patient. She was very irritable and non-compliant then child life came in and assisted in calming the patient and soothing them.