

IM5 Clinical Worksheet – PICU

Student Name: Date:	Patient Age: 7 month Patient Weight: 5.8 kg
1. Admitting Diagnosis and Pathophysiology (State the pathophysiology in own words) Respiratory failure - Rhinovirus PRIMARY cause of common cold	2. Priority Focused Assessment R/T Diagnosis: Respiratory Assessment
3. Identify the most likely and worst possible complications. respiratory problems	4. What interventions can prevent the listed complications from developing? hand hygiene get vaccinated
5. What clinical data/assessments are needed to identify these complications early? Respiratory	6. What nursing interventions will the nurse implement if the anticipated complication develops? give fluids give cough depressant
7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient. 1. nonnutritive sucking 2. parent holding the child	8. Patient/Caregiver Teaching: 1. lift the HOB 2. take cough depressants 3. drink fluids > 8oz Any Safety Issues Identified: help with breathing
Please list any medications you administered or procedures you performed during your shift:	

PICU

GENERAL APPEARANCE	CARDIOVASCULAR	PSYCHOSOCIAL
Appearance: ☒ Healthy/Well Nourished ☒ Neat/Clean ☐ Emaciated ☐ Unkept Developmental age: ☒ Normal ☐ Delayed	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 <u>3+</u> L <u>3+</u> Lower R <u>3+</u> L <u>3+</u> 4+ Bounding 3+ Strong 2+ Weak 1+ Intermittent 0 None	Social Status: ☐ Calm/Relaxed ☐ Quiet ☐ Friendly ☐ Cooperative ☒ Crying ☐ Uncooperative ☐ Restless ☐ Withdrawn ☐ Hostile/Anxious Social/emotional bonding with family: ☒ Present ☐ Absent
NEUROLOGICAL	ELIMINATION	IV ACCESS
LOC: ☒ Alert ☐ Confused ☐ Restless ☐ Sedated ☐ Unresponsive Oriented to: ☐ Person ☐ Place ☐ Time/Event ☒ Appropriate for Age Pupil Response: ☒ Equal ☐ Unequal ☒ Reactive to Light ☒ Size <u>2</u> Fontanel: (Pt < 2 years) ☒ Soft ☐ Flat ☐ Bulging ☐ Sunken ☒ Closed Extremities: ☒ Able to move all extremities ☒ Symmetrically ☐ Asymmetrically Grips: Right <u>3</u> Left <u>3</u> Pushes: Right <u>3</u> Left <u>3</u> S=Strong W=Weak N=None EVD Drain: ☐ Yes ☒ No Level _____ Seizure Precautions: ☐ Yes ☒ No	Urine Appearance: <u>yellow</u> Stool Appearance: <u>green/yellow</u> ☒ Diarrhea ☐ Constipation ☐ Bloody ☐ Colostomy	Site: <u>dorsal hand</u> ☒ INT ☐ None ☐ Central Line Type/Location: <u>hand 24 g</u> Appearance: ☒ No Redness/Swelling ☐ Red ☐ Swollen ☒ Patent ☐ Blood return Dressing Intact: ☒ Yes ☐ No Fluids: <u>none</u>
RESPIRATORY	GASTROINTESTINAL	SKIN
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: <u>4</u> L/min ☐ BiPap/CPAP: _____ ☐ Vent: ETT size _____ @ _____ cm ☐ Other: _____ Trach: ☒ Yes ☐ No Size <u>3.5</u> Type <u>uncuffed</u> Obturator at Bedside ☒ Yes ☐ No Cough: ☒ Yes ☐ No ☒ Productive ☐ Nonproductive Secretions: Color <u>purulent</u> Consistency <u>thick</u> rate <u>3</u> Suction: ☒ Yes ☐ No Type <u>wgll</u> Pulse Ox Site: <u>right foot</u> Oxygen Saturation: <u>92</u>	Abdomen: ☒ Soft ☐ Firm ☐ Flat ☐ Distended ☐ Guarded Bowel Sounds: ☒ Present X <u>4</u> quads ☒ Active ☐ Hypo ☐ Hyper ☐ Absent Nausea: ☒ Yes ☐ No Vomiting: ☒ Yes ☐ No Passing Flatus: ☐ Yes ☒ No Tube: ☐ Yes ☒ No Type _____ Location _____ Inserted to _____ cm ☐ Suction Type: _____	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: _____ Mucous Membranes: Color: _____ ☒ Moist ☐ Dry ☐ Ulceration
	NUTRITIONAL	PAIN
	Diet/Formula: <u>formula</u> Amount/Schedule: <u>5ml q3h</u> Chewing/Swallowing difficulties: ☐ Yes ☒ No	Scale Used: ☐ Numeric ☒ FLACC ☐ Faces Location: _____ Type: _____ Pain Score: 0800 _____ 1200 <u>0</u> 1600 _____
	MUSCULOSKELETAL	WOUND/INCISION
	☐ Pain ☐ Joint Stiffness ☐ Swelling ☐ Contracted ☐ Weakness ☐ Cramping ☐ Spasms ☐ Tremors Movement: ☐ RA ☐ LA ☐ RL ☐ LL ☒ All Brace/Appliances: ☒ None Type: _____	☒ None Type: _____ Location: _____ Description: _____ Dressing: _____
	MOBILITY	TUBES/DRAINS
	☐ Ambulatory ☐ Crawl ☒ In Arms ☐ Ambulatory with assist _____ Assistive Device: ☐ Crutch ☐ Walker ☐ Brace ☐ Wheelchair ☐ Bedridden	☐ None ☒ Drain/Tube Site: <u>G tube LHO</u> Type: _____ Dressing: <u>COI</u> Suction: _____ Drainage amount: _____ Drainage color: _____

PICU

INTAKE/OUTPUT													
PO/Enteral Intake	07	08	09	10	11	12	13	14	15	16	17	18	Total
PO Intake/Tube Feed			5	1									75
Intake - PO Meds													
IV INTAKE	07	08	09	10	11	12	13	14	15	16	17	18	Total
IV Fluid													
IV Meds/Flush													
Calculate Maintenance Fluid Requirement (Show Work)							Combined Total Intake for Pt (mL/hr)						
$100 \times 5.8 \div 24 = 27.6$							75 mL						
OUTPUT	07	08	09	10	11	12	13	14	15	16	17	18	Total
Urine/Diaper													
Stool				1									41
Emesis				1									
Other													
Calculate Minimum Acceptable Urine Output							Average Urine Output During Your Shift						
$2 \text{ mL} \times 5.8 \times 5 = 58$							41						

Children's Hospital Early Warning Score (CHEWS)	
(See CHEWS Scoring and Escalation Algorithm to score each category)	
Behavior/Neuro	Circle the appropriate score for this category: 0 1 2 3
Cardiovascular	Circle the appropriate score for this category: 0 1 2 3
Respiratory	Circle the appropriate score for this category: 0 1 2 3
Staff Concern	1 pt - Concerned
Family Concern	1 pt - Concerned or absent
CHEWS Total Score	
CHEWS Total Score	Total Score (points) <u>1</u>
	Score 0-2 (Green) - Continue routine assessments
	Score 3-4 (Yellow) - Notify charge nurse or LIP, Discuss treatment plan with team, Consider higher level of care, Increase frequency of vital signs/CHEWS/assessments, Document interventions and notifications
	Score 5-11 (Red) - Activate Rapid Response Team or appropriate personnel per unit standard for bedside evaluation, Notify attending physician, Discuss treatment plan with team, Increase frequency of vital signs/CHEWS/assessments, Document interventions and notifications