

Pediatric ED Reflection Questions

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

I saw a lot of psych/mental health evaluations along with a broken arm and an ear infection.

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 who came into the PED were adolescents. I found this to be surprising as I expected it to be more school-age children or younger.

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

My overall experience was a bit different than I anticipated. I thought it was going to be hectic at all times with a lot going on every second, but I quickly found out that there is some down time in the ER. It was good that there wasn't anything major that happened because we don't want hurt kids, but from a student perspective it would have been interesting to see how a trauma was handled. I did get to see a broken arm get reduced which was something new to me, and I got to see the process of how they triage a patient.

4. How did growth and development come into play when caring for patients (both in triage and in treatment rooms)?

When triaging patients, growth and development came into play especially when trying to get pain ratings and getting information on what exactly was happening. With adolescents it is easier because they can tell you exactly what they are feeling as opposed to an infant where you could only use their body language and what the parents stated about their behavior to gauge how they were feeling.

5. What types of procedures did you observe or assist with?

I got to observe the reduction of the broken arm and tube blood with the nurse from the IV. I also got to be on pacifier/sweet-ease duty for an infant getting a straight-cath for a urine sample.

6. What community acquired diseases are trending currently?

The nurse stated that measles was trending currently.

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

The nurse stated that suicidal ideation was a trend that was being seen especially in the adolescent population.

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

The nurse stated that it is situation dependent, but for the most part they gather at the nurses' station with the doctor and discuss what went well/positives and what they could have done better. She also mentioned how they have free counseling they can utilize outside of work if they need it. Debriefing is important because it allows the team to recognize where they could improve in order to have a better outcome in the next situation, as well as for the team unity when discussing what they did well.

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

First the parents sign in and the nurse gets a general story of what is happening. Then the patient and family are brought to the room and asked again what is happening. After an understanding of the situation, vital signs, pain ratings and sometimes other tests such as glucose checks are done. Then after all the information is gathered they are scored 1-5. An example that the nurse gave me for each is: 1=cardiac arrest, 2=critical, 3=IV, labs, imaging; 4=lacerations, 5=pain

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

The Child Life Specialist in the ED does a lot of what the nurse called "prep work" so essentially they do a lot of education for example, showing the kids how the IV is going to be inserted. The nurse said, "we just poke", while child life does a lot of the distraction.