IM5 Clinical Worksheet – PICU

Student Name: Andrea Fabela
Date: 8/26/25

Patient Age: 7 y.o.
Patient Weight: 27.1 kg

1. Admitting Diagnosis and Pathophysiology (State the pathophysiology in own words)

Asthma Exacerbation - uncontrolled asthma w/ s/s of coughing, wheezing, SOB

2. Priority Focused Assessment R/T Diagnosis:

listening to lungs
checking fever

3. Identify the most likely and worst possible complications.

triggered by virus
↳ (+) for enterovirus (rhinovirus)

4. What interventions can prevent the listed complications from developing?

- good hygiene
- avoid other sick children
- covering coughs & sneezes

5. What clinical data/assessments are needed to identify these complications early?

Labs (WBC)

VS (fever) chills, fatigue

6. What nursing interventions will the nurse implement if the anticipated complication develops?

(WBC maybe ↑) = antibiotics
↑ fever - tylenol

7. Pain & Discomfort Management:
List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient.

1. Distraction (ex: coloring book)
2. warm blanket (vasodilates)

8. Patient/Caregiver Teaching:

1. S/S of Resp. distress
   ↳ ↑RR, ↑HR, SOB, wheezing
2. Proper use of inhaler
3. S/S of infection
   ↳ fever, chills, ↑ pain, diarrhea, Pale

Any Safety Issues Identified:

Please list any medications you administered or procedures you performed during your shift:

Albuterol - bronchodilator med. (relieve wheezing & SOB)
cetirizine (Zyrtec) - allergy
Dexamethasone (Decadron) - allergy

PICU

GENERAL APPEARANCE

Appearance: ☒ Healthy/Well Nourished ☐ Neat/Clean ☐ Emaciated ☐ Unkept

Developmental age: ☒ Normal ☐ Delayed

NEUROLOGICAL

LOC: ☒ Alert ☐ Confused ☐ Restless ☐ Sedated ☐ Unresponsive

Oriented to: ☒ Person ☒ Place ☒ Time/Event ☒ Appropriate for Age

Pupil Response: ☒ Equal ☐ Unequal ☒ Reactive to Light ☐ Size 2mm

Fontanel: (Pt < 2 years) ☐ Soft ☐ Flat ☐ Bulging ☐ Sunken ☐ Closed

Extremities: ☒ Able to move all extremities ☐ Symmetrically ☐ Asymmetrically

Grips: Right S Left S

Pushes: Right S Left S

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_____

Consistency_____

Suction: ☐ Yes ☒ No Type _____

Pulse Ox Site left side pointer finger

Oxygen Saturation: 97%

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 3+ L 3+

4+ Bounding 3+ Strong 2+ Weak 1+ Intermittent 0 None

ELIMINATION

Urine Appearance: Clear yellow

Stool Appearance: _____

☐ Diarrhea ☐ Constipation ☐ 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 _____

Location _____ Inserted to _____cm

☐ Suction Type: _____

NUTRITIONAL

Diet/Formula: regular diet

Amount/Schedule: 3 meals/day

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: RA _____ ☐ INT ☐ None ☐ Central Line

Type/Location: Peripheral 22g

Appearance: ☐ No Redness/Swelling ☐ Red ☐ Swollen ☐ Patent ☐ Blood return

Dressing Intact: ☒ Yes ☐ No

Fluids: Dextrose 5%, NS + KCL 20 65ml/hr

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: _____

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: _____

PICU

INTAKE/OUTPUT													
PO/Enteral Intake	07	08	09	10	11	12	13	14	15	16	17	18	Total
PO Intake/Tube Feed		300mL											300mL
Intake – PO Meds													
IV INTAKE	07	08	09	10	11	12	13	14	15	16	17	18	Total
IV Fluid	65	65	65	65	65	65							390mL
IV Meds/Flush		3											3mL

Calculate Maintenance Fluid Requirement (Show Work)

27.1kg

10X100 = 1,000mL

10X50 = 500mL

7kgx20 = 140mL

1,000
500
+ 140
1,640mL
24 = 68mL/hr

Combined Total Intake for Pt (mL/hr)

IV rate = 65mL

OUTPUT	07	08	09	10	11	12	13	14	15	16	17	18	Total
Urine/Diaper	350mL												350mL
Stool													
Emesis													
Other													

Calculate Minimum Acceptable Urine Output

0.5mL x 27.1kg = 13.55mL/hr

Average Urine Output During Your Shift

350mL

350mL / 6hr = 58.3mL/hr

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) 2
	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

Pediatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
DSW 5%, NS+KCL20	Isotonic ☐ Hypotonic ☐ Hypertonic ☒	Rate 65 mL/hr	K+, Na	Skin rash, itching, hives, swelling of face, lips, tongue or throat

Student Name: Andrea Fabela	**Unit:** PICU	**Patient Initials:** AG	**Date:** 8/26/2025	**Allergies:** N/A

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Is med in therapeutic range? If not, why?	IVP – List diluent solution, volume, and rate of administration IVPB – List concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
Cetirizine (Zyrtec)	antihistamines	Allergies	5 mL, PO daily	Yes Click here to enter text.	N/A	Headache, sleepy, tired or weak,dry mouth	1. When getting out of bed assess for dizziness & drowsiness might affect gait balance 2. reassess S/S within 15-30 mins after taking med to reasure no reaction happened 3. precaution; mentsal/mood changes may occur before drowsiness 4. Contraindicated on pts who are hypersensitive to any of its ingredients
Dexamethasone (Decadron)	corticosteriod	Inflammation/ Allergies	5 mL, PO daily	Yes Click here to enter text.	N/A	Increased HR, irritability, unusual tiredness or weakness	1. Do not take this med if child is showing S/S of an infection 2. Precaution is can increase BP, assess BP 3. Precaution; steriods increase glucose, if pt is a diabetic extra caution when monitoring sugar 4. Precaution; with VS!