ART line?

# 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 _____
**Fontanel:** (Pt < 2 years) ☑ Soft ☐ Flat ☐ Bulging ☐ Sunken ☐ Closed
**Extremities:** ☐ Able to move all extremities ☑ Symmetrically ☐ Asymmetrically
Grips: Right N Left N
Pushes: Right N Left N
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
**Trach:** ☑ Yes ☐ No Size 4 Type bivona Obturator at Bedside ☑ Yes ☐ No
**Cough:** ☐ Yes ☑ No ☐ Productive ☐ Nonproductive
**Secretions:** Color clear Consistency _____
**Suction:** ☑ Yes ☐ No Type _____
**Pulse Ox Site** L foot
**Oxygen Saturation:** 96%

## 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:** yellow,
**Stool Appearance:** ~~brown~~ yellow/green ☑ 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:** formula
**Amount/Schedule:** 140mL q 2 hrs
**Chewing/Swallowing difficulties:** ☑ Yes ☐ No
G-button

## 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:** right brachial ☐ INT ☐ None
☑ Central Line – broviac
Type/Location: art line/broviac
**Appearance:** ☑ No Redness/Swelling ☐ Red ☐ Swollen ☐ Patent ☐ Blood return
**Dressing Intact:** ☑ Yes ☐ No
**Fluids:** NS, heparin, papavarine

## 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: coxsy
**Mucous Membranes:** Color: pink ☑ Moist ☐ Dry ☐ Ulceration

## PAIN

**Scale Used:** ☐ Numeric ☑ FLACC ☐ Faces
**Location:** NA
**Type:** NA
**Pain Score:** 0800 ____ 1200 0 1600 ____

## WOUND/INCISION

☑ None
**Type:** _____
**Location:** _____
**Description:** _____
**Dressing:** _____

## TUBES/DRAINS

☐ None
☑ Drain/Tube
Site: suprapubic
Type: catheter
Dressing: _____
Suction: NA
Drainage amount: 10mL
Drainage color: yellow