

Pediatric ED reflection questions

1. The types of patients I seen in the PED were toddlers with a type of on coming infection
2. The majority of patients were toddlers. I did expect this age group since they are very prone to getting sick
3. My overall experience was bittersweet. I did not expect it to be as slow but then it is a good thing since that meant there were not many sick children that needed immediate help
4. Growth and development came into play with atraumatic care in taking vital signs and using language they would understand.
5. I only observed/helped with vital signs
6. A community acquired disease that is trending right now would be some type of respiratory infection. The toddlers all seemed to have a fever and cough
7. Mental health has definetly grown into a big part of pediatrics such as depression, anxiety, eating disorders, and even suicidal thoughts
8. Debriefing is important because it allows the team to talk about what they seen and felt with the only people who understand their emotions
9. The process of triaging patients in the PED starts with the caregiver and child going up to the desk, stating why they are there, and filling out necessary forms. Once the form is returned, the secretary will put their information in the computer and get documentation ready for the nurse. The nurse then calls the patient and family back to the triage room where questioning along with vital signs are taken. Once the nurse has all the needed information, she takes them to an actual patient room, sets up the bed and call light, and lets them know their doctor will be with them soon. With the information obtained, the nurse will rate the patient on a scale of 1-5 indicating the severity of the patients illness and how quick the patient should be seen so the doctor knows who to see first.
10. Child life specialist may help calm a child and/or prepare them for procedures that may happen promptly depending on their needs.