

Pediatric ED Reflection Questions

1. What types of patients (diagnoses) did you see in the PED?
 - Broken arm, renal failure, diaper rashes, suicidal thoughts/actions, gallbladder scan, head wound from falling out of car seat onto pavement, Tylenol overdose, Illius
2. The majority of the patients who came into the PED were from which age group? Was this what you expected?
 - School aged, yes considering I assumed it would be more flu/respiratory issues however that is not the case. Yes, I was correct about the age range however not for the correct reasons. It has mainly been N/V/D, injury, or suicidal thoughts
3. Was your overall experience different than what you expected? Please give examples.
 - It was, I expected more high intensity situations and but the problems that came through was N/V/D with school aged kids so it was a sort of low concern to a lot of nurses. It was slow and that surprised me considering adult ED/ER is always super busy. It got busier as the day went on but it overall was not a crazy day and that shocked me considering what I am used to.
4. How did growth and development come into play when caring for patients (both in triage and in treatment rooms)?
 - I was able to communicate with the patients properly so that I could get honest feedback from them such as where pain may be and what kind of pain it is. I knew what pain scales to use as well as what forms of language to use like 'ouchies' for toddlers or "pain" for adolescents. I was able to also understand what may be going through the pt's mind especially for a suicidal adolescent because their mindset was that they feel alone and like no one understands them.

5. What types of procedures did you observe or assist with?
 - Straight catheter on a 19 month old and a full work up on a 6 week old
6. What community acquired diseases are trending currently?
 - STD's and strep
7. What community mental health trends are being seen in the pediatric population?
 - Suicidal thoughts and ideations relating to anxiety and depression.
8. How does the staff debrief after a traumatic event? Why is debriefing important?
 - Sit and use hospital counseling along with a code lavender. This includes snack and a good time. It allows them to cope with the situation and allow them to educate about what could have been done better next time.
9. What is the process for triaging patients in the PED?
 - They fill out paperwork, get called back to which we ask if their vaccinations are up to date and what their pharmacy is. After that, we take them to get a weight then go ahead to the triage room to get vital signs and chart the pt's appearance and problems.
10. What role does the Child Life Specialist play in the PED?
 - They provided distraction and comfort for the child in a way that makes it less traumatic. Child life also can explain things in a way that allows kids to better understand and not feel so intimidated but the situation.