

MCN Unit 4 Online Assignment

Please complete the chart with a minimum of 3 bullet points in each section. This table is meant to be your notes related to the content so include as much information as you feel appropriate to address each area.

Growth and Development Chart		
Infant	Physical Development	<ul style="list-style-type: none"> • Triple birth weight and double birth length in the first 12 months. Factors include hereditary, nutritional status and overall health, cultural factors, and growth patterns, known as spurts and lags. • 5th-95th percentile is acceptable. 6-8 teeth erupt by first year and parents should use a damp cloth to clean teeth. Bottle should be weaned by 12 months of age for dental health. • Heart rate of 120-160 bpm then slows to 100-120 bpm. RR is 30-60. BP 50-70 over 30/45 then 90/60 by 12 months.
	Cognitive Development	<ul style="list-style-type: none"> • Discriminate between persons, comprehend word meaning, and learn object permanence. • Experiencing the oral stage. • Finds enjoyment, pleasure, and satisfaction sucking
	Gross Motor	<ul style="list-style-type: none"> • 3 months – hold head up, 5-6 months – rolls over, 6 months – holds head steady • 7 months – sits leaning forward, 8 months – sits unsupported, 9 – sitting position and pulls up to a stand • 10 months – “cruises,” 12 months – stands alone, 9 to 12 months – begins to walk independently
	Fine Motor	<ul style="list-style-type: none"> • 3 month – knows hands and brings them together • 4 months – grasps rattle, 6 months – transfers objects from hand to hand, 9 months – finger and thumb to grasp items (prehension) and brings items together • 9 months – drinks from a cup (sippy cup), 12 months – begins to nest two items and build two-block tower
	Psychosocial Development	<ul style="list-style-type: none"> • Bonding should be encouraged right after birth by skin-to-skin, talking to infant in a quiet, nurturing, and calm tone. • Trust as the foundation • 2 months – socially smiles, 3 months – recognize faces, 5 months – smiles at a mirror, 6 months – fears strangers
	Language Development	<ul style="list-style-type: none"> • 1 to 2 months – cooing, 2 to 4 months – laughing • 3 to 4 months – consonant sounds, 6 months – imitative sounds • 12 months – one to two words, “Ma ma” or “Da Da”
	Sleeping Patterns and Concerns	<ul style="list-style-type: none"> • 22-23 hrs then 16 hrs with two naps, place infant on their back to reduce SIDs • Don’t use blankets or pillows and put baby in a fleece onesie. • Don’t sleep with an infant and don’t leave a tv or radio on. Use a night light.
	Nutrition	<ul style="list-style-type: none"> • Breastfeeding or formula feeding exclusively until 6 months. 8-12 times during the day then gets less frequent. • Infant cereals, green vegetables, yellow/orange vegetables, pureed fruits, lean meats/egg yolks at 10 months. No cow’s milk until 12 months. • Breastfeeding is always recommended but might not be able to do due to enteric tube feedings, anatomical

		abnormalities, GI disease, or severe failure to thrive. Mom also might not be able to produce milk.
	Age Appropriate Activities	<ul style="list-style-type: none"> • Playing peekaboo • Looking at picture books • Musical toys
	Anticipatory Guidance & Teach Points	<ul style="list-style-type: none"> • Teething: clean the infant’s teeth with a wet washcloth and fluoridated toothpaste should not be used because it could cause poisoning. • Using bottles: an infant who is formula-fed should be weaned from the bottle completely before 1st birthday. No juice or sweet beverages. • Using pacifiers: only pacifiers made of one piece of plastic should be offered to prevent choking.
Toddler	Physical Development	<ul style="list-style-type: none"> • A child’s height at 24 months typically represents half the expected height of adulthood. • Abdomen protrudes because of their undeveloped abdominal muscles. • Walking no later than 15-16 months, if not then HCP needs to see them.
	Cognitive Development	<ul style="list-style-type: none"> • Marks the sensorimotor cognitive development period. • Trial and error experimentation to develop appropriate understanding of the environment. Also the time of relentless exploration and needs constant play/stimulation. • Second stage is more complex mental combinations – age-appropriate puzzles and stacking items according to size/shape.
	Gross Motor	<ul style="list-style-type: none"> • Crawling • Jumping • Climbing
	Fine Motor	<ul style="list-style-type: none"> • Building and holding onto blocks • Grasping a string and pulling it • Reaching their arms up
	Psychosocial Development	<ul style="list-style-type: none"> • Autonomy versus shame and doubt. Functional independence to provide opportunities for emotional support and encouragement to learn. • Distinct challenges like being afraid of the dark and separation anxiety. • Don’t understand the important that others place on items and will manipulate these items. Create a safe environment.
	Language Development	<ul style="list-style-type: none"> • Begins second year with only one to two words, ending with 300-500 words. • Learn to use pronouns, two-three-word sentences, and state first/last name by 2 ½ years old. • Talking, reading, and playing with young children are related to language skills.
	Sleeping Patterns and Concerns	<ul style="list-style-type: none"> • 14 hrs of sleep per day. Don’t put down for a nap too late in afternoon – only one nap. • Might fight going to sleep/nap time and security items can be important. • May want a particular bedtime routine with a bed story.
	Nutrition	<ul style="list-style-type: none"> • Keep milk consumption down to 24-32 oz of milk a day, with 70-90 calories a day. • Offer small portions and cut into small bites in order not to choke. • “Food jags” are when child is only willing to eat a few foods for several days. “Food lags” are a lack of interest in food and skipping meals.
	Age Appropriate Activities	<ul style="list-style-type: none"> • Child grocery carts, large trucks/cars

		<ul style="list-style-type: none"> • Large plastic balls/soft mats, soft foam balls • Toddler outdoor structures, games with music
	Anticipatory Guidance & Teach Points	<ul style="list-style-type: none"> • “Food lags” where the toddler will not eat meals and have no interest in eating. This is normal and part of development. • Home safety: Safety gates are important to prevent toddlers from exploring unsafe rooms such as the kitchen, garage, and bathroom. • Kitchen safety; it is essential that kitchen cabinets and drawers have childproof locks placed on them.
Preschool	Physical Development	<ul style="list-style-type: none"> • Slowing of physical growth. All 20 teeth erupted by this time and blood sugar begins to stabilize so need less snacks. • VS: HR = 65-110, RR = 20-25, BP = 95-110/60-75. • Immunity matures: lice, step throat, influenza comes up. Visual disturbances also come up.
	Cognitive Development	<ul style="list-style-type: none"> • Preconceptual thinking: young child’s judgement of his or her environment and objects by sensory experiences and classifying objects by one characteristic only. • Intuitive thinking: ability to classify info while becoming more aware of cause-and-effect relationships. • Symbolic functioning: experience of play and is demonstrated by a child who assigns meaning to an object different than its literal meaning, such as using a pillow for a horsey.
	Gross Motor	<ul style="list-style-type: none"> • Benefits from mastery of new tasks and will want to showcase accomplishments to parents, caregivers, and nurses it. • For example, if they attempt to tie their shoe, provide praise. • Don’t reprimand a preschooler who fails at a task.
	Fine Motor	<ul style="list-style-type: none"> • Holding a pencil/writing • Feeding self with a spoon • Brushing teeth
	Psychosocial Development	<ul style="list-style-type: none"> • Initiating activities that are independent and self-directed. • The child can develop guilt. • Guide and support child while also settling limits and restricting the child partaking in unsafe situations.
	Language Development	<ul style="list-style-type: none"> • Tells simple stories and enjoys describing what they see, hear, and experience. • May exaggerate and boast because they are in the magical thinking stage. • Speech problems, like stuttering or lisp, should be identified as soon as possible.
	Sleeping Patterns and Concerns	<ul style="list-style-type: none"> • Need 12 hrs of uninterrupted sleep • Provide a bedtime routine and activities to help the child slow down before bedtime. • No television because it shows that it disturbs the sleep routine.
	Nutrition	<ul style="list-style-type: none"> • 1200-1600 calories a day and still may be picky with foods. • Offer fruits and vegetables at every meal and encourage protein. For example, MyPlate. • Offer nutritious snacks that are appealing like peanut butter on graham crackers or celery with cream cheese.
	Age Appropriate Activities	<ul style="list-style-type: none"> • Play kitchens, construction kits • Automobile play kits, tool chests • Medical and nursing kits

	Anticipatory Guidance & Teach Points	<ul style="list-style-type: none"> • Preschooler may demonstrate sleep disturbances, especially if the child is new to preschool, where there is a high level of activity and a new level of intense stimulation. • To combat obesity, provide a variety of nutritious foods and teach the importance of physical activity and vigorous play. • Appropriate disciplining: time outs should be 1 minute for each year of age, and keep them in a safe area.
School-age	Physical Development	<ul style="list-style-type: none"> • Body systems become more mature and functional. Girls will have a bigger bladder capacity than boys do. • Immune system can launch both an appropriate antibody response and a localized inflammatory response to the presence of injury or infection. • Prepubescence: process takes an average of 2 years ending with ability to reproduce. Puberty: begins in girls 8-12 and boys 9-14. Precocious puberty: happens before the age of 8 or 9.
	Cognitive Development	<ul style="list-style-type: none"> • Marked by an increase in the ability to think both more abstractly and more concretely and to begin to make rational judgements. • Teacher will strongly positively influence social skills, manners, and self-esteem. • Homework becomes very important and sense of identity.
	Gross Motor	<ul style="list-style-type: none"> • Catching a small ball with hands only. • Walking backwards, heel-toe. • Balancing on one leg.
	Fine Motor	<ul style="list-style-type: none"> • Holding a pencil and being able to move fingers. • Cutting neatly around shapes with scissors. • Getting dressed and using the bathroom independently.
	Psychosocial Development	<ul style="list-style-type: none"> • Industry: child's sense of worth. • Sexual latency: a time when sexual desires are lessened. • Concrete operations: the beginning of logical thought. More socialization happens.
	Language Development	<ul style="list-style-type: none"> • Simple, but complete sentences using an average of 7 words. • Grammar and pronunciation not usually advanced. • Learning more words while at school.
	Sleeping Patterns and Concerns	<ul style="list-style-type: none"> • Needs 10-12 hrs of sleep. • May avoid going to sleep, engage in stalling behaviors, have difficulty falling asleep, or experience difficulty staying asleep as they contemplate concerns and worries. • Lack of sleep can cause a poor academic performance.
	Nutrition	<ul style="list-style-type: none"> • Appropriate portion control. • Until the preadolescent growth spurt, they need fewer calories than everyone younger than them. • Promoting intake of well-balanced meals is a major responsibility of the nurse.
	Age Appropriate Activities	<ul style="list-style-type: none"> • Playing board games or video games • Cooking a special meal with family • Making homemade birthday gifts from recycled materials, craft supplies, and found objects
		Anticipatory Guidance & Teach Points

		<ul style="list-style-type: none"> • Set limits on the use of technology before bedtime. Child may difficult falling asleep.
Adolescent	Physical Development	<ul style="list-style-type: none"> • Marks a period of rapid physical growth for both boys and girls. • The rapid skeletal growth usually beginning at about 10-12 yrs for girls and 12-14 yrs for boys, and finishes at about 17. • The following conditions causes a deviation: down syndrome, turner syndrome, fetus exposure to alcohol or phenytoin, history of extreme prematurity (less than 28 wks gestation), fetus exposure to TORCH
	Cognitive Development	<ul style="list-style-type: none"> • Argue purely for the sake of arguing with adults and consider everything a “big deal” and display overly exaggerated responses (being overly dramatic). • Being self-centered in life and conversations: teens are naturally “me-centered.” • Rapidly jump to conclusions and constantly find fault in positions that adults take (parents, teachers, and others of authority).
	Gross Motor	<ul style="list-style-type: none"> • Increased coordination • Increased physical strength and prolonged endurance • Tie shoes laces and undo small buttons when getting dressed
	Fine Motor	<ul style="list-style-type: none"> • Being able to have pincher grasp where you can manipulate objects easily. • Working on difficult puzzles • Finger/thumb isolation to text or use a tablet.
	Psychosocial Development	<ul style="list-style-type: none"> • Emotional development: a period of high influence of the peer group on self-esteem, self-image, and self-worth, feeling of invincibility, feeling grown-up. • Spiritual development: seriously question existing moral values and how these values have relevance to themselves, other individuals, and society. Postconventional level. • Recreation: engage with a social community as the main form of recreation, and social media has become the main source of their “social communities.”
	Language Development	<ul style="list-style-type: none"> • Figurative language: better at understanding metaphors, similes, and idioms. • Able to engage in longer conversations. • Able to have social language skills like debating and persuasion.
	Sleeping Patterns and Concerns	<ul style="list-style-type: none"> • Needs 8-10 hrs of sleep • Different sleep patterns than adults do, based on a different circadian rhythm, or internal biological clock • Produce the brain hormone melatonin later at night than adults and therefore may complain of difficulty falling asleep.
	Nutrition	<ul style="list-style-type: none"> • More than 2,000 calories a day are needed if participating in vigorous sports. • Teens need magnesium, vitamin D, and calcium for their rapid skeletal growth. • High-fat, high-sodium, and low nutrition “fast foods” are detrimental to health and may contribute to obesity, high blood pressure, elevated serum cholesterol, and anemia.
	Age Appropriate Activities	<ul style="list-style-type: none"> • Organized and spontaneous sports activities with use of safety gear • Caring for a pet • Reading for pleasure
	Anticipatory Guidance & Teach Points	<ul style="list-style-type: none"> • Teens need adequate calcium intake to build strong bones. Fortified cereals, calcium-fortified orange juice, sardines, dairy products, spinach, beans, and legumes are good sources of calcium. • Hearing: teach families to be aware of the danger of developing cochlear damage from sustained loud

		<p>music is important.</p> <ul style="list-style-type: none">• Social isolation: Family members need to be able to identify when a teen is demonstrating social isolation. Because this time is characterized by social interactions, peer group association, and intimate friendships.
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