Princess Hernandez

N433

Abusive Head Trauma Virtual Simulation
Debriefing Questions

1. How does this assignment relate to the course material?

The assignment relates to the course material because it discusses important factors for determining if a child experienced abuse head trauma, such as clinical findings, head-to-toe assessment findings, and imaging suggestive that a child is experiencing intentional injury or trauma. This course teaches about different clinical findings and assessment findings from different diseases, illnesses, and unintentional injuries. As nurses, we should be able to identify warning signs if a child is abuse. Child abuse is difficult to detect, and it may remain unnoticed for years (Ricci et al., 2021). The assignment emphasized the area the health care professional needs to know on how to determine if a child is experiencing child abuse. The material shows imaging patterns suggestive of abusive head injury, clinical findings that can differentiate from an illness to intentionally inflicted injury. Some of these signs and symptoms of injury can be due to illness, congenital abnormalities, or unintentional injury; however, physical examination and caregiver reports can help determine if these injuries are related to medical problems or due to abuse.

2. Identify three ways this activity affects nursing practice when caring for the pediatric population.

The course talks about evaluating abusive head trauma by doing a comprehensive and complete assessment of the child. When evaluating abusive

head trauma, nurses should take a history of the event leading up to the child's injury, prior history of other problems, and a complete head-to-toe physical assessment (DelSignore et al., 2017). Comprehensive and complete assessment affects nursing practice when caring for the pediatric population because this aspect is essential to do in order to confirm an abused child. Detailed assessment help identifies other referral and consults needed for the children to treat and prevent further abuse and injury.

The webinar also talks about imaging patterns on CT and MRI that are suggestive of abusive head trauma (DelSignore et al., 20217). Some of the abusive trauma may not be physically present and can only be seen radiographically. There are no diagnostic tools specific for abusive trauma. However, radiographic imaging can help determine abusive patterns that can help nurses determine the action that needs to be done or devise a treatment plan for a child suspected of abuse. This radiographic imaging helps us determine the location of the injury not seen physically and the extent of the injury.

Lastly, the webinar talks about the consequence of abusive head trauma to the eyes, such as retinal hemorrhage. As a nurse, we should be aware what it looks like and how can affect the child. Eye complications due to abusive head trauma can significantly affect the quality of life of the child. We need to collaborate with other medical professionals such as ophthalmologists to ensure that this patient can get the proper care to prevent further damage that can cause severe impairment of their vision.

3. **What are some potential health risks (short-term and/or long-term) for a child who sustained an abusive head trauma injury?**

   A child who sustained an abusive head trauma can have many potential health risks. Joyce et al. (2021) state that abusive head trauma can cause many complications. A child with abusive head trauma can have mild learning disabilities to severe cognitive or physical abnormalities. It can also cause death to a child. A child can have poor eyesight due to head trauma, leading to long-term blindness (DelSignore et al., 2017). A child who sustained abusive head trauma injury can have weakness, hearing impairment, and feeding difficulties that can cause failure to thrive and developmental delay, leading to intellectual deficits, sensory deficits, and motor dysfunction (Joyce et al., 2021). Abusive head trauma injury can also lead to problems or impairment of mobility and paralysis, which can cause a reduction in the quality of life of the child.

4. **Choose one of the health risks identified in the above question and develop a plan of care to address this. Include a Nursing diagnosis, a measurable goal, and at least three nursing interventions to achieve this goal.**

   a. **Nursing diagnosis:** Imbalanced Nutrition: Less Than Body Requirements related to feeding difficulties secondary to abusive head trauma as evidence by failure to thrive.

   b. **Measurable Goal:** The measurable goal is to stabilize or prevent any further loss of weight of the child.

   c. **Intervention 1:** Monitor food intake and weigh the child daily (Swearingen & Wright, 2019). Monitoring food intake ensures that the child is getting

enough nutritional intake and calories for their body needs. Daily weights

ensure they are not losing more weight and ensure that the food intake is

sufficient.

d. **Intervention 2:** The child should be provided with small, frequent feeding

high carbohydrates and protein. Small frequent meals can help increase

the intake of the child (Swearingen & Wright, 2019).

e. **Intervention 3:** The nurse should refer to a dietitian for complete nutrition

assessment and methods for nutritional support to the child (Swearingen

& Wright, 2019). A dietician can help determine the child's daily

requirements of specific nutrients and additional nutritional support that

the child needs to promote sufficient nutritional intake. They can make a

plan to ensure that the child is getting all nutrition and not losing weight.

5. **How will the knowledge gained during this assignment influence your**

nursing practice?

The knowledge that Princess gained in this activity will influence her

nursing practice because it helps her understand mechanisms of injury, clinical

findings, and imaging patterns suggestive of abusive head injury. As nurses, we

are mandated to report any suspected cases of child abuse to the appropriate

authorities. The information she learned through this assignment help her

become more aware of different clinical presentations and imaging patterns on

CT and MRI of a child with abusive head trauma. The assignment points out how

to differentiate an injury that is due to illness, medical problems, complications, or

unintentional inflicted injury to an injury that is intentional or from abuse. Sometimes caregivers may not be fully honest and open about the incidents contributing to the child's injury presentation, so it is hard to assume a child is abused. With detailed health history of child illness, head-to-toe assessment, caregiver reports, clinical findings, and imaging findings will help confirm if a child's injury is from abuse or just from medical problems.

References:

DelSignore, L., Silvera, M., & Mantagos, J. (2017, November 2). *Abusive Head Trauma*. OPENPediatrics. https://learn.openpediatrics.org/learn/course/3627/abusive-head-trauma.

Ricci, S. S., Kyle, T., & Carman, S. (2021). *Maternity and pediatric nursing* (4th ed.). Wolters Kluwer.

Swearingen, P. L., & Wright, J. D. (2019). *All-in-one nursing care planning resource medical-surgical, pediatric, maternity, and psychiatric-mental health*. Elsevier.

Debriefing Journal Rubric

Minimum Words: 100 per question

CRITERIA	POOR	FAIR	GOOD
Concise and Complete **Total: 3 points**	• Content is incomplete. • Major points are not clear and /or persuasive **1 point**	• Content is not comprehensive and /or persuasive. • Major points are addressed, but not well supported. • Research is inadequate or does not address course concepts. **2 points**	• Content is comprehensive, accurate, and persuasive. • Major points are stated clearly and are well supported. • Content and purpose of the writing are clear. **3 points**
Thoughtful Reflection- How will this affect your practice? **Total: 10 points**	• Paper lacks many elements of correct formatting. • Paragraphs are inadequate or excessive in length. • Unspecific as to how simulation meets learning objectives. **1 point**	• Paper follows most guidelines. • Paper is under word length. • Lacks some specifics as to how simulation meets learning objectives. **5 points**	• Paper follows designated guidelines. • Paper is the appropriate length as described for the assignment. • States clearly as to how simulation meets learning objectives. **10 points**
APA Format Correct spelling/Grammar. **At least 1 scholarly reference required.** **Each question is answered with at least 100 words**	• Lack of APA format. • Paper contains numerous grammatical, punctuation, and spelling errors. • Language uses jargon or conversational tone • Lack of APA citation use and Reference page if references used. • 2-3 questions do not meet the 100-	• Inappropriate APA format. • Paper contains few grammatical, punctuation and spelling errors. • Language lacks clarity or includes the use of some jargon or conversational tone. • Inappropriate APA citation use and reference page if references used.	• Correct APA format • Use of 1 scholarly reference • Rules of grammar, usage, and punctuation are followed; spelling is correct. • Language is clear and precise; sentences display consistently strong, varied structure • Correct APA citation and

	word requirement	• 3 questions meet the 100-word requirement	reference page if references used. • All questions meet the 100-word requirement
Total: 10 points	**1 point**	**5 points**	**10 points**
Paper submitted to Dropbox within 72 hours of the simulation experience. **Total: 2 points**			Paper submitted to Dropbox on time. **2 points**

Total Points: _____