

## Main Category: Management of Care

### Subcategory: Collaboration with Interdisciplinary Team

#### Topic: Seizures: Findings to Report for a 2-week-old Newborn

- Report to emergency care if the newborn is experiencing a seizure longer than 5 minutes and is experiencing prolonged periods of apnea.
- Prompt treatment of neonatal seizures is essential to ensure hypoxia doesn't present.
- Prolonged and untreated seizures can cause permanent damage due to decreased oxygen flow to the brain and excessive brain cell activity.

## Main Category: Health Promotion and Maintenance

### Subcategory: Health Promotion/Disease Prevention

#### Topic: Cystic Fibrosis: Identifying Related Conditions

- CF related diabetes necessitates monitoring of blood glucose levels. Administration of insulin is needed, oral glycemic medications are not effective.
- Respiratory and PT, social services, pulmonologist, pharmacist, pediatrician, and dietitians may be involved in the care of the child who has CF.
- Meconium ileus, prolapse of the rectum, intestinal obstruction, and GERD are gastrointestinal issues related to CF.

#### Topic: Health Promotion of Adolescents (12-20 years): Nutrition Guidelines

- Rapid growth and high metabolism require increases in quality nutrients, and make adolescents unable to tolerate caloric restrictions.
- Additional calcium, iron, protein, and zinc are needed in times of rapid growth.
- Overeating and undereating present challenges during the adolescent years. Yearly assessments of BMI, height, and weight are needed to identify nutritional issues.

## Main Category: Pharmacological and Parenteral Therapies

### Subcategory: Expected Actions/Outcomes

#### Topic: Cardiovascular Disorders: Identifying a Positive Response to Digoxin

- Digoxin is used to improve myocardial contractility. Pulse needs to be taken prior to administration.
- If the child vomits, do not re-administer the dose.
- Observe for manifestations of digoxin toxicity; decreased HR, appetite, and N/V.

### Subcategory: Parenteral/IV Therapies

#### Topic: IV Therapy: Planning Antibiotic Therapy for an Infant

- Give antibiotics intermittently in a small solution through a continuous IV fluid system or with saline or heparin lock systems.
- Infuse the medications for short periods of time and on schedule.

- Use a secondary IV bag or bottle setup, a volume-control administration set, or mini infusion pump.

### **Subcategory: Pharmacological Pain Management**

#### **Topic: Miscellaneous Pain Medications: Preparing to Apply Lidocaine and Prilocaine Cream**

- These medications decrease pain by blocking conduction of pain impulses in a circumscribed area.
- Apply to intact skin 1 hour before routine procedures or superficial puncture.
- Prior to the procedure, remove the dressing and clean the skin with aseptic solution.

## **Main Category: Reduction of Risk Potential**

### **Subcategory: System Specific Assessments**

#### **Topic: Fractures: Priority Action Following Cast Application**

- Assess and monitor neurovascular status, reporting any abnormalities to the provider.
- Elevate the cast above the level of the heart during the first 24-48 hours to prevent swelling.
- Turn and position the client every 2 hours so that dry air circulates around and under the cast for faster drying.

### **Subcategory: Therapeutic Procedures**

#### **Topic: Cardiovascular Disorders: Planning Care for an Infant Following Cardiac Catheterization**

- Assess insertion site (femoral or antecubital) for bleeding or hematoma.
- Prevent bleeding by maintaining the affected extremity in a straight position for 4-8 hours.
- Increase in fluid intake post procedure can help with the removal of the dye from the body.

#### **Topic: Hemodialysis and Peritoneal Dialysis: Performing Peritoneal Dialysis**

- Check the access site dressing for wetness (risk of dialysate leakage) and exit-site infections.
- Warm the dialysate prior to instilling.
- Maintain surgical asepsis of the catheter insertion site when accessing the catheter.

## **Main Category: Physiological Adaptation**

### **Subcategory: Fluid and Electrolyte Imbalances**

#### **Topic: Renal Disorders: Expected Laboratory Findings of Nephrotic Syndrome**

- Increased specific gravity, proteinuria, and few RBCs will be noted labs in nephrotic syndrome.
- Weight gain, ascites, edema, decreased and frothy urine are some expected findings in patients that present with nephrotic syndrome.
- Nursing care consists of providing rest, maintaining strict I&Os, monitoring vital signs and daily weights.

### **Subcategory: Unexpected Response to Therapies**

#### **Topic: Fractures: Monitoring for Postoperative Complications**

- Monitor for findings of infection at the incision site.

- Encourage mobilization as soon as prescribed and instruct the client that weight-bearing to the affected extremity may be limited.
- Perform neurovascular checks and appropriate pain management. Monitor for fat embolism, compartment syndrome, and osteomyelitis.