

N433 Infant, Child, and Adolescent Health
Proctored ATI Remediation Template

Student Name: Natalie Zizumbo
Assessment Name: RN Pediatric Nursing 2023
Semester: Fall 2024

Main Category: Management of Care

Subcategory: Informed consent

Topic: Professional practice: Obtaining informed consent

- The nurse's role in obtaining informed consent is witnessing the client's signature and ensuring the client understands what has been explained.
- Informed consent can only be signed by a competent adult unless the minor is emancipated.
- A competent adult can be the parent, legal guardian, power of attorney, court-appointed representative, or, in some cases, a relative.

Main Category: Safety and Infection Control

Subcategory: Standard Precautions/Transmission-Based Precautions/Surgical Asepsis

Topic: Infection control: Identifying common sources of health-care associated infection

- Healthcare-associated infections are infections that occur while the client is in a healthcare setting.
- The most common healthcare-associated infections are urinary tract infections. Other areas are surgical wounds, respiratory, and bloodstream.
- One way to prevent infections is proper hand washing and a aseptic technique.

Main Category: Health Promotion and Maintenance

Subcategory: Health screening

Topic: Cognitive and Sensory Impairments: Testing a Preschooler's visual acuity

- It is important that children get yearly eye exams to assess for any impairments.
- Visual screenings can be done using charts such as the Snellen letter, tumbling E, or pictures. A picture chart should be used when screening a preschooler.
- The child should be 10-20 feet away from the chart and keep both eyes open, covering one eye at a time.

Main Category: Psychosocial Integrity

Subcategory: Therapeutic environment

Topic: Psychosocial issue of Infants, Children, and Adolescents: Planning therapeutic interventions

- The nurse should be familiar with the different types of psychosocial issues that a client may be experiencing to provide the proper care needed.
- Many interventions can be provided depending on the psychosocial issue. The nurse can encourage peer group discussions and counseling, assist with learning coping strategies and planning activities, and assist families in forming behavioral strategies.
- The nurse should assess suicide risk in clients who are at risk or have a history.

Main Category: Basic Care and Comfort

Subcategory: Nonpharmacological Comfort Interventions**Topic: Pain management: Pain scale for a toddler who is cognitively impaired**

- When assessing pain in a child, it is important that the nurse select an appropriate pain scale to use based on the child's development.
- If a child is 4 years or older, they can use verbal responses to rate their pain. If the child is younger than 4, the nurse should visually assess behaviors to rate pain.
- In a cognitively impaired child, the nurse should use the FLACC pain scale or non-communication children's pain checklist to rate their pain.

Main Category: Pharmacological and Parenteral Therapies**Subcategory: Adverse effects/Contraindications/Side effects/Interactions****Topic: Airflow disorders: Monitoring for Adverse Effects of Prednisolone**

- Prednisolone is a glucocorticoid that can be used to treat asthma and is taken orally.
- Long-term use can cause adrenal gland suppression, immunosuppression, and bone loss.
- It can also cause hyperglycemia, myopathy, and peptic ulcers.

Main Category: Reduction of Risk Potential**Subcategory: Laboratory values****Topic: Cardiovascular disorders: Laboratory tests for Confirmation of Rheumatic fever**

- Rheumatic fever is an inflammatory disease that results from a throat infection.
- A throat culture for Group A beta-hemolytic streptococcus is used to screen children who present with sore throats.
- A blood Antistreptolysin O titer is the most reliable way to diagnose rheumatic fever.

Subcategory: Therapeutic procedures**Topic: Urinary elimination: teaching about 24-hour urine collection**

- A 24-hour urine collection is a specific type of timed urine specimen collection.
- The first void of the day should always be discarded.
- After the first void is discarded, all other voids should be collected. The specimens should be labeled and then refrigerated.

Main Category: Physiological Adaptation**Subcategory: Medical emergencies****Topic: Acute and Infectious Respiratory Illnesses: Nursing actions for a Child who has Epiglottitis**

- Epiglottitis is a medical emergency that causes swelling of the epiglottis.
- Symptoms include drooling, tripodding, dysphagia, stridor, retractions, high fever, difficulty breathing, and sore throat.
- The priority nursing action is to protect the client's airway. The nurse should also prepare the client for intubation and administer corticosteroids, antibiotics, and oxygen. The client should also be placed on droplet precautions for the first 24 hours after starting antibiotics.

Topic: Hematologic disorders: Identifying priority findings for Sickle cell anemia

- Sickle cell anemia is a genetic disorder that causes the red blood cells to take on a sickle shape, causing obstruction and tissue hypoxia.
- A client with sickle cell anemia can have symptoms of pain, dyspnea, pale mucous membranes, jaundice, and headache.
- A client can also go into vaso-occlusive crisis, which is a severe painful episode; an aplastic crisis, which is severe anemia; and sequestration, which causes excessive pooling of blood in the liver and spleen.

Subcategory: Unexpected Response to Therapies

Topic: Fractures: Monitoring for Postoperative Complications

- There are many different types of fractures that a client may present with.
- Compartment syndrome is a postoperative complication that can occur when a cast or splint is used to treat the fracture. Symptoms include pain, paresthesia, pulselessness, paralysis, and paleness.
- Other complications include embolism and osteomyelitis.

Main Category: Clinical Judgement**Subcategory: Analyze Cues****Topic: Acute and Infectious Respiratory Illnesses: Analyzing Respiratory Findings for a 3-year-old**

- Children have shorter respiratory tracts, where infections can reach the lower airways more quickly than adults.
- A child experiencing a sore throat, cough, dyspnea, fatigue, chest pain, and fatigue could be experiencing a respiratory illness.
- The nurse should monitor the child for signs of respiratory distress, such as tachycardia, tachypnea, and nasal flaring or retractions.

Topic: Cystic Fibrosis: Anticipated Prescribed Medications

- Cystic fibrosis is a genetic respiratory disorder that causes an increase in thick mucus in organs, specifically the lungs.
- A client with cystic fibrosis will have airway clearance therapy prescribed twice a day to help expectorate secretions. It should not be done before or after meals.
- Bronchodilators are also prescribed and given before airway clearance therapy. Clients may also be prescribed albuterol and dornase alfa to decrease the viscosity of mucus.

Topic: Enuresis and Urinary Tract Infections: Caring for a Child who has Vesicoureteral Reflux

- Vesicoureteral reflux is the backflow of urine from the bladder that returns up the ureters.
- This condition can cause the child to have enuresis.
- Education may be provided to the family on interventions to help with enuresis, such as having their child urinate before bed, waking them at scheduled times during the night, and restricting fluid 2 hours before bed.

Subcategory: Generate Solutions**Topic: Enuresis and Urinary Tract Infections: Planning care for a Child who has a Urinary Tract Infection**

- Symptoms of a urinary tract infection (UTI) in a child include enuresis, dysuria, fever, abdominal pain, foul-smelling urine, and chills.
- Nursing interventions for caring for a child with a UTI include educating frequent voiding and complete bladder emptying, fluids, monitoring input and output, and administering antibiotics and analgesics.
- Some education that can be provided to the parents to prevent reoccurrence includes wiping front to back, changing diapers frequently, using cotton underwear for older children, and no bubble baths.

Subcategory: Take Action**Topic: Hematologic Disorder: Planning Care for an Adolescent who is Experiencing a Vaso-Occlusive Crisis**

- Vaso-occlusive crisis is a painful episode that can occur in a client with sickle cell anemia.
- The client can have an acute episode caused by dehydration or decreased oxygen that leads to severe pain, swollen hand/feet joints, abdominal pain, and jaundice.
- Nursing interventions when caring for a client in a Vaso-occlusive crisis include bed rest, administering oxygen, fluid replacement, and pain management. The nurse may also administer hydroxyurea if prescribed to prevent reoccurrence.



Individual Performance Profile

ADJUSTED INDIVIDUAL
TOTAL SCORE



TIME SPENT

35:57

Individual Name: Natalie Zizumbo

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Institution: Lakeview CON

Program Type: BSN

Test Completed Date: 12/4/2024 **# of Points:** 89

Focused Review Progress

View missed topics and launch study materials below.

Last accessed: 12/10/2024 **Time spent:** 02:29:41

[Review](#)

PROFICIENCY LEVEL

Level 2