# N433: School Nurse Shadowing Reflection

Tayelor Lowe

Lakeview College of Nursing

N433: Pediatrics

Professor Pamela Armstrong

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**1.) How does this clinical relate to the course?**

**a.** This clinical relates to the course because it allows me to see a very different and specific avenue of pediatric nursing. Before starting this semester, everyone always said that pediatric nursing was a different type of nursing. To be honest, I did not believe it. I did not think it was going to be much different than adults, only in the way that we communicate. Was I proved wrong! The world of pediatrics is vastly different. I have come to see firsthand how some of the children did not gain trust within their first year of life and how that affects them today. I got to truly see that kids are a reflection of their parents. According to Emily, there are quite a few boys who hit girls because they witness their dad hitting their mom; therefore, they think it's okay. We have discussed in class how the first few years of a child's life are influential. Unfortunately, for some of these kids, they had a poor example, which is beyond heartbreaking.

**2.) How were you an engaged nursing professional today?**

**a.** Today, I cared for children in what seemed to be the most minuscule way but was everything in the world to them. I gave lots of band aids, icepacks, and hugs. Almost everyone got a cup of water the moment they walked in, which seemed to help all of them. I read a book to a little girl and talked about what she won from the treasure chest. I also would talk with them. Children and I have one thing in common- we love to talk. I would ask them about their weekend, how old they were, what grade they were in, or what they were having for lunch. The simple distraction and attentive listening seemed to help a lot of them and proved to always be the cure for them.

**3.) How did you contribute to the service provided by the school nurse today?**

**a.** I got to work with Emily (the school nurse) by carefully tracking one boys blood sugar. He has Type I diabetes. His sugar level is so sensitive. It would rise and fall within minutes, giving him insulin before his meals and snacks in between. We gave lots of medications, such as Adderall and guanfacine. We did check a few kids oxygen saturation because they would come in short of breath because their asthma was exacerbated. We also listened to their lungs and heart. I also got to help chart in their charting system. While I never typed in the chart, I was able to give her some of the details for each child. The kids would walk in sad yet always leave happily.

**4.) Name three ways this clinical site impacts pediatric health.**

**a.** For one thing, this school provides transportation for the kids. They specifically have a truancy liaison who will pick children up when the bus can't, such as the caregivers oversleeping and don't have a vehicle. She will even take the children to doctors appointments because a lot of the caregivers do not have a form of transportation. This school tries its best to make sure children are cared for physically. Secondly, this school takes health maintenance and management very seriously, as well. Simply put, if children do not have their physical or immunizations, they get kicked out. It is a very hard decision for Emily to come to, especially when her coworkers, the teachers, ask what the big deal is. While it is a hard decision to come to, it forces the parents to take some sort of action. Regardless, Emily does a great job at keeping the children healthy, which impacts their health tremendously. Third, the school in general gets involved with DCFS

frequently. Emily has had to make numerous and difficult calls because of what the students tell her about their home life. She has had a huge impact on their personal safety. No matter what, Emily is most definitely in each students corner.

5.) **What are the health risks of the population served during today's clinical based on your observations today?**

   **a.** Based off what I saw as a student in the school nursing environment for our area, most of the care we provided involved care for asthma patients and making sure the children got their ADHD medications. These medications were important to give because the patients that needed their inhalers were coming in short of breath. There was even a student who has asthma, but her caregivers have not taken her to get any medication. Despite her being short of breath and wheezing and yet considered stable, there was nothing we could have done. The kids that needed their ADHD medications, such as Adderall, came in full of energy. One student, in particular, would not stop touching everything in the nurses office. These two health risks deeply affected our students.

6.) **Choose one of the health risks identified in question five 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. Ineffective breathing pattern related to bronchial inflammation as evidenced by dyspnea (Curran, 2025). The measurable goal would be, "Within the next twenty minutes, the patient will show a more stable pattern of breathing while improving their oxygen saturation back to baseline." To achieve this goal, I would make sure the child is sitting in high fowlers. This helps with lung expansion. Second, I

would demonstrate to them the need to breathe in through the nose and out through the mouth. If they start breathing fast and heavily, it will only make the situation worse and give them anxiety. Lastly, I would give them their medication, if they have one. Their albuterol inhalers will open their lungs back up, so they can breathe better.

7.) **How will your experience during the school nurse job shadowing impact your nursing practice?**

a. This experience has shown me that kids need love. Love for these kids proved to be the biggest problem solver. A little girl came in crying because one of the boys cut in front of her in PE. All she needed was a hug. One little girl came in because she had a scratch. All she needed was for me to read her a book and give her a band aid. Truly, in this environment, I do not need IVs or medications to solve these kids problems. They just want someone to validate them, to listen to them, and to protect them. We even had one little girl, who after taking her medication, performed a song and dance for the nurse and me. She left here all excited and joyous because we gave her “100 points” because of how good of a performance it was. Especially in this particular area, a significant number of these kids come from broken and poverty homes. It is truly the little things that keep them going. For me, this experience will stick with me through the rest of my life. I do not have to be superwoman to help them. I have to just listen, rub their backs, and let them sleep.

## References

Curran, A. (13 June 2025). *Asthma nursing diagnosis & care plan*. NurseStudy. https://nursestudy.net/nursing-diagnosis-for-asthma/.