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Journal 1

This was my first day at Blythedale children's hospital, my professor showed us around the units and introduced us to the nurses. I was assigned a 2-year-old male. He was diagnosed with Respiratory Failure with a tracheostomy ventilator dependence. I assessed the patient, and his vitals were within normal limits. Temperature 97.1, pulse 113 BPM, RR 40, BP 97/57, and oxygen Saturation 99%. He was on a strict I/O, while on 1/24/2023 his input was 425 mL AND his output was 94 within 24 hours. His neuro was awake and alert, pupils equally reactive appropriately with full ROM and no sign of weakness, GI assessment was no abdominal pain, no vomiting, bowel sounds in all four quadrants and abdomen soft and non-tender. HEENT was macrocephaly and plagiocephaly with neurosurgery with trach dependence. Patient skin was warm, dry and intact, shown no color of cyanotic jaundice or flushed and for age-appropriate skin turgor/mucous membrane was pink and moist. Some of the medication he's taking was acetaminophen PRN 180 mg, albuterol sulfate 2.5 , Cetirizine 2.5 mg, famotidine, hydrochlorothiazide and spironolactone. The patient was tolerating all meds throughout the G tube and all feed throughout the J-tube. My professor and I performed a tracheostomy care and she let me practice my skill. My greatest challenge was not being able to practice a tracheostomy on a pediatric patient in my previous clinical experience and not remembering each step until my

professor helped my along. My greatest accomplishment was being able to do a tracheostomy care and being able to practice new skills on pediatric patient and not making major mistakes.