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On our third day of clinical, I was assigned to a three-month-old patient with a medical diagnosis of bronchiolitis due to human meta-Pneumovirus. He is on contact and droplet precautions. The three-month-old boy did not have a past medical or surgical history. He was born at 37 weeks and 3 days gestation, and the mothers' pregnancy was complicated due to maternal hypertensive disorder. The infant weighed 6.27 kg and was 23.62 inches long. During the morning assessment, the infant had a rectal temperature of 98.6, respiration rate 42, heart rate 131 BPM, and pulse ox symmetry of 100%. When I approached the infant in the crib, an inspiratory wheeze was audible without a stethoscope, and very loud with auscultation. The infant was also very congested and when I placed my hand on the infant's chest, I could feel the mucus in his chest, as he was breathing. The mother is the primary caregiver for this child, and she was there in the room. She stated that he ate at 7 AM and was able to consume 3, 6 oz, bottles of Similac. The patient was prescribed acetaminophen as needed for temperatures over 100.4°, dextrose 5% 12 mL/hour, prednisolone 2 mg/kg/day, and albuterol, nebulizer, and breathing treatments as needed.

At 10 AM the respiratory therapist came in to administer an albuterol breathing treatment for the infant. After 15 minutes of the breathing treatment, the infant was able to breathe better as evidenced by less wheezing and congestion loosened up in his chest, nose, and throat area. The

respiratory therapist suctioned the baby's nasal passage and also oral airways to ease respiratory effort. She also provided chest PT to the patient and demonstrated how to do it to the mother where it doesn't hurt the baby, it loosens the mucus secretions. The mother was very worried that her baby has not been sleeping well and seems to be very jittery and irritable. I was able to explain to her that common side effects of albuterol are excitement, insomnia, palpitations, tachycardia, and jitteriness. So, I emphasized the importance of providing comfort measures for the baby to optimize rest periods.

The greatest challenge I experienced during the clinical day was remembering to do my hourly checks. I believe I experienced professional growth when asked by the mother why her baby just wasn't seeming to get any rest. While reflecting on my own personal experiences growing up with asthma, my mom was properly educated, and was able to educate me on what to expect after treatment, and how I would feel. If her son does end up developing asthma, then she will be able to educate him on the side effects as they are considered normal and just need to find a better way to relax yourself. During morning assessments, my group was able to complete the morning vitals as a group and engage with the child and the caregiver. Communication with the nurses is imperative because I don't want them to think that I'm doing something that I shouldn't be, and I want them to know exactly how I am interacting with the patient and what form of assistance I can provide. Therefore, interpersonal communication skills, especially with faculty and staff members play a huge role in not just my learning but also the care of the client. I think in the area where I need improvement in knowing the specific milestones for different age groups. I'm very confident in my knowledge of newborns, but pediatrics has overwhelmed me quite a bit. The scripture that I kept in mind this past clinical day was Matthew 7:7, "ask and it will be given to you, seek, and you will find; knock, and it will be open to you." I thought about

the scripture because in all things we should seek God's guidance during good and bad times. We don't know everything, and we don't understand everything but as long as we can learn from situations that have occurred and ask for guidance to handle things better, and to do His will, then all will be ok. Just as we are students in nursing school. We don't know everything, we don't know how to handle situations if we don't ask, we won't know if we don't seek the correct answers or correction we will continue to go in the wrong direction. God has put our teachers in our structures in our lives to comfort us and direct us onto the path that will set us for success.