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NUR 392 Clinical

April 13, 2023

#### Clinical Journal #4

My group was assigned to a 17-month-old patient who immigrated from Columbia with his family two days prior. He was admitted April 4th with a diagnosis of acute gastroenteritis. His mother and father were at the bedside with him and neither of them speak English. His parents brought him in because he was experiencing symptoms for two days. He had 10 episodes of vomiting, and he was vomiting everything that he ate. He was not able to keep anything in his stomach and was also having diarrhea and abdominal cramping. His parents also stated that he was very tired and was not playing regularly. The patient was given dextrose 5% in normal saline in the emergency room for dehydration and fluid and electrolyte in balance. He was also given acetaminophen for fever. Gastroenteritis is an intestinal infection typically spread by contact with an infected person or through contaminated food or water. Since the family immigrated two days prior, most likely, the child got sick while he was abroad, and symptoms progressed.

Upon our initial interaction with the family, the parents were very attentive to the child and showed lots of love and affection towards the child. The patient's vital signs were all stable. His temperature was 98.8°, heart rate one 33 bpm, respiration rate 27 breaths per minute, blood pressure on the right leg was 97/62. His IV site was dry intact. No signs of infection or infiltration. He had normal breath sounds equally and bilaterally, pulses were 2+ bilaterally, good skin turgor, and normoactive bowel sounds in all quadrants. We asked when the last bowel

movement or wet diaper was, and they just changed him before we walked in at 8:30am. He had a dirty and wet diaper, and the output was 215 mL. The mother stated that he was able to eat his breakfast today and he ate chicken soup Jell-O had 6 oz of water and 6 oz of Pedialyte. At 9:40am, he had a wet diaper, and the output was 40mL.

I think my greatest challenge for this clinical day was using the translator phone and remembering to speak in short and clear sentences so that the patient's parents would understand clearly. I have used a translator phone before, but the patient also understood more English. Also, when using the translator phone, I must remember to speak to the patient directly instead of telling the translator to 'please ask her something.' I feel that communication becomes more personal that way just like if you're speaking to somebody who needs a sign language interpreter, you still speak to them directly. I think my greatest accomplishment was feeling comfortable enough to go into the patient's room and assess the patient hourly and ask them if they need anything. as well as going in and monitoring input, an output very carefully for this patient by receiving the diapers and weighing them promptly. I believe I still need to improve in my assessment, skills of an older child patient who is diagnosed with mood disorders. It was hard for me to ask the teenage girl diagnosed with a mood disorder if she was having any suicidal thoughts, or if she was thinking of hurting herself during hourly checks. I took the time to ask if she was excited to go home, and if she was excited to see her family and friends. She opened up and told me that she was very excited to go home.

The scripture that I kept in mind during this clinical day was Psalms 34:18, "The Lord is close to the brokenhearted and saves those who are crushed in spirit." I thought about this verse because the young 13-year-old girl diagnosed with mood disorders is suffering from a lot of pain, mentally and psychologically. She has had ideas of ending her own life and has expressed it to

multiple people around her. Her spirit is very crushed, and she is brokenhearted. I didn't know what else to do to help her other than to pray for her. I pray that the Lord be her strength and her guide and give her peace in her heart that she may live out her life for his glory and restore her faith in Him. She is a young girl, and very susceptible to the evils of this world. I understand that some people don't have a support system that is rooted in the word. I'm not sure what her story is or what her religious affiliation is, but I pray that the Lord can speak to her and change her heart.