Stressors of Hospitalization
- Separation from family, friends, school
- Loss of control
- Bodily injury
- Pain
- Procedures

What they hear...
- Time to move you to the floor (think they have to sleep on the floor)
- I need to flush your IV (think of toilet)
- You will be asleep during the surgery (might wake up in the middle of it, animals are “put to sleep”)
- I need to take your temperature (might perceive as “taking” away from them)

Erikson’s Classifications

<table>
<thead>
<tr>
<th>Age</th>
<th>Erikson’s Stage</th>
<th>Nursing Implications</th>
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<tbody>
<tr>
<td>Infancy/Toddler</td>
<td>Trust vs. Mistrust</td>
<td>Respond to crying; tell them the truth; have parents present; continuity of care/primary nursing; follow-through on things</td>
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<tr>
<td>Toddler/Preschooler</td>
<td>Autonomy vs. shame and doubt</td>
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<td>Preschool</td>
<td>Initiative vs. guilt</td>
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<tr>
<td>School age</td>
<td>Industry vs. inferiority</td>
<td>help them to feel productive or that they are progressing/learning; let them help with procedures...give them a little job with you; positive feedback;</td>
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<tr>
<td>Adolescence</td>
<td>Identity vs. role confusion</td>
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<tr>
<td>Adult</td>
<td>Intimacy vs. isolation</td>
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</tbody>
</table>

Piaget’s Stages
concept of ‘charity’ comes into play during “concrete operational stage”
Maslow (look this up)
Most important: Physical needs
Next: Safety
Next: Love
Next: Self esteem
Least important: Self actualization

Kohlberg’s Moral Development
• Preconventional (ages 2 to 7 years)
  • Follows rules set by authority
• Conventional (ages 7 to 12 years)
  • Seeks conformity and loyalty
• Postconventional (ages 12 and older)
  • Strives to construct a value system independent from others.

Infant 0-18 months
• Response to illness/injury:
  • Separation from parent is their greatest concern (try to keep parents and kids together)
  • Frightened by loud noise sudden movements
  • Stranger anxiety
• Interventions:
  • Minimize separation
  • Calm parents
  • Familiar objects...kids should have objects from home...not all new stuff from gift shop.
  • Appropriate stimulation
  • No bottle propping
  • Try to limit the number of care givers assigned to the child.
  • Encourage bonding
  • Talk to infant.
  • Provide parents with information.
  • Allow out of crib time to older infants.

NCLEX Question
A six month old infant is admitted to the pediatric unit for a 2 week course of antibiotics. His parents can visit only on weekends. Which action indicates that the nurse understands the infant’s emotional needs?
A: the nurse places the infant in a four bed unit
B: the nurse places the infant in a room away from other children.
C: The nurse assigns the infant to a different nurse each day.
D: The nurse assigns the infant to the same nurse as often as possible.

Toddler 1 year to 3 years
• Response:
  • Fear separation from parents, dark, alone
    • protest (crying), seem depressed, despair (goes in stages)...LOOK THESE UP!
  • View illness as punishment and fear of being hurt
  • Loss of autonomy
  • Restriction of movement...they would rather explore their environment
  • Sleep disturbance

Toddler: Interventions
• Allow parent to stay with child.
• Advise parents to bring toys from home, not buy new toys.
• Close crib all the way (so kid is in a cage)
NCLEX
A 30 month old child has been hospitalized for an acute respiratory infection. The parents have visited regularly, but the child cries whenever they leave. When they visit today the child ignores them. How can the nurse explain this behavior to the parents?
A: Your child is having separation anxiety which is typical behavior. You should continue to visit and provide support during the hospitalization
B: Your child has adjusted to the hospital environment and is doing fine
C: Your child has become attached to the primary nurse
D: Your child is exhausted from crying whenever you leave

Preschooler 3 to 6 years
- Regression
- Fear body mutilation, dark, unknown, separation, pain, blood
- Magical thinking and fantasy
- May respond with aggression (Play-Doh is great for working out aggression)
- Medical play is very important

Preschooler: Interventions
- Simple, concrete explanations
- Use familiar words
- Assure the child they did not cause the illness.
  “Which ear do you want to use to take your temperature?”
- Avoid giving choices if none exist.

School-age: 6 to 12 years
- Greatest concern is mutilation and bodily harm
- Also fears loss of status with peers, loss of control, pain, death
- Guilty feelings
- Children have injury d/t beginning to ride bikes and injury...stuff like that.
- Kids will name their caths (Broviac) and such...personalize it.
- EMLA cream...kids this age can understand this is going to make the area numb.

School Age Fun!
- “I like the playroom”: no meds or treatments in the playroom
- If over age 12 there is a “teen room”...movies, internet, books
- Therapeutic play is the work of children
- Allow them freedom of movement
- Independence
- Explain in terms the child can understand.

NCLEX
A ten year old will need to be hospitalized for an extended period of time. Which of these is most important:
A: Arrange for a teacher to do a lesson plan
B: Allow the client to follow the nurse around on the ward
C: Arrange for visits from friends (more of a teen issue)
D: Provide routine rest time

Adolescents: 12 to 18 years
- Fear loss of control and death
- Concern regarding change body function or appearance
- Concern about separation from peers
- Body image changes
- Social isolation
Adolescent: Interventions
• Provide a special area for activities with this age group.
• Allow them to wear their own clothing when possible.
• Provide privacy...a lot of teens won’t take shower b/c they’re afraid someone will walk in.
• Avoid “interrogation”
• Allow friends to visit or bring foods.

NCLEX
A 16 year old girl has been admitted for surgery to correct scoliosis. She will probably be hospitalized for six days. When should discharge teaching begin?
A: Upon admission
**B: Before admission**
C: Post op day 1
D: The day before discharge.

NCLEX
An adolescent boy is waiting with his mother for a health screening at the outpatient clinic. Which of the following responses by the nurse is MOST appropriate?
A: What brings you to the clinic today?
B: Mom, how is your adolescent doing?
C: You two look like you get along very well
**D: Mom, why don’t you take a seat in the waiting room?**

NCLEX
An adolescent client has just had surgery and has a dressing on the abdomen. Which of the following questions would the nurse expect the client to ask initially?
A: Did the surgery go okay?
B: **Will I have a large scar?**
C: What complications can I expect?
D: When can I return to school?

NCLEX Question
Before a routine checkup in the pediatrician’s office, an 8 month old infant is sitting contentedly on his mother’s lap, chewing on a toy. When preparing to examine this infant, which of the following actions should the nurse do first?
A: measure the head circumference
B: **auscultate heart and lung sounds**
C: elicit pupillary reaction
D: obtain body weight

Family Systems Theory
• Family continually interacts
• Family viewed as a whole
• Change in one member affects all

Family centered care
• Parents are the constant, and the experts of the child…parents can often tell you if pt is doing better or worse.
• Respect, support, and encourage the family to provide care through illness, and recovery.
• Empowerment of family...give them a sense of control.
  • ex...parents can keep track of input on the whiteboard.

Families
• Family is who they say they are.
• Group of people joined together by some type of bond...Social, emotional, financial
• Family Centered Care Key Concepts
Siblings
- May think it is their fault their sibling is sick.
- May fear they will get sick also.
- May fear the parent will also get sick.

Emergency Situations
- Parents in room during painful procedures proved helpful, even if the child cries more!
- Situational Crisis
- Denial

NCLEX
An 11 year old client has been complaining of severe pain since surgery two days ago. The client is currently in the play room, avidly playing video games, and shows no evidence of pain. When the nurse has the client return to bed, the client begins to complain of severe pain again. Which of the following is probably true about this pain?
A: The client is addicted to pain meds, so pain management must be carefully monitored
B: Pain medications wore off as the client went to bed.
C: The client probably said there was no pain so bedrest wouldn’t be indicated
D: The distraction of playing videos games is an important adjunct to other pain management techniques.

Critically Ill Child
- Explain things before they walk into the room for the first time.
- Encourage them to touch the child.
- Children can still hear even when sedated!

Consent
- Every attempt should be made to obtain parental consent.
- “Assent” is the child’s permission to proceed.
- Minors are deemed emancipated if:
  - Self-supporting
  - Married
  - Pregnant or a parent
  - In the military
  - Declared to be emancipated

Chronic Illness
- Research shows these parents need more information than those of acutely ill children.
- 10% of children have a chronic condition
- Can families care for them at home?

Post Hospital Reactions
- Younger: Aloof then dependent. New fears, temper tantrums, finickiness, regression
- Older: Emotional coldness then demanding dependence. Anger, jealousy.

Professional Pediatric Nurses
- Educator
- Advocate
- Researcher
- Manager
- Caregiver
NCLEX
The student nurse is watching a group of children at play in the hospital play room. Which child is in a dangerous situation?
A: A 5 year old is digging in the sandbox with a plastic shovel
B: A 4 year old is winding up a jack in the box
C: A 3 year old is tossing a latex balloon in the air
D: A 2 year old is turning the pages of a cloth book.

NCLEX
A parent calls the pediatric clinic and is frantic about the bottle of cleaning fluid her child drank 20 minutes ago. Which of the following is the most important instruction the nurse can give the parent?
A: This too shall pass.
B: Take the child immediately to the ER
C: Contact the Poison Control Center quickly
D: Give the child syrup of ipecac

NCLEX
A nurse has just started her rounds delivering medication. A new patient on her rounds is a 4 year-old boy who is non-verbal. This child does not have on any identification. What should the nurse do?
A: Contact the provider
B: Ask the child to write their name on paper.
C: Ask a co-worker about the identification of the child.
D: Ask the father who is in the room the child’s name.