



# Pediatric Nursing

## major theories of child development

- Nurses should understand the child's developmental stage to design stimulating activities, appropriate teaching plans and promote the child's further development
- Child development is a complex set of stages progressing from basic to more complex levels of function
- Major developmental theorists have conceptualized development as a progression of sequential stages
- See page 6 for more information on child development

## vital signs

**A reflection** of the body's physiologic status. **Reflexes** are different for children because of immaturity, increased basal metabolic rate and growth and development.

**Heart rate and respiratory rate** decrease with age while blood pressure increases with age.

### Rectal temperature

- Rectal measurement reflects the body's core temperature
- Oral temperature measurement is appropriate for child over 3 years
- A one degree elevation of temperature causes an increase in respiratory rate by 4 breaths per minute and increases oxygen need by 7%.

### Heart rate measurement

- The most accurate way to count the heart rate is using a stethoscope and taking the apical pulse
- The rate should be listened to for a full minute to evaluate any changes in rhythm and to count the rate

### Respiratory rate measurement

- Young children use the diaphragm as the primary mechanism of breathing
- Observe the rise and fall of the abdomen to count respirations in children under 6 years of age
- Count for an entire minute

### Blood pressure measurement

- Use the right sized cuff
- If the blood pressure is measured in the lower extremities, remember it will be slightly higher than the pressure in the arms

## vital signs by age

Age	Pulse rate	Respiratory rate	Blood Pressure
Newborn	110-160	30-50	90/55
1 yr	80-150	20-40	90/60
2 yrs	80-130	20-30	95/60
4 yrs	80-120	20-25	95/65
6 yrs	75-115	20-25	100/56
8 yrs	70-110	15-20	105/56
10 yrs	70-110	15-20	110/58

## pain assessment in children

Pain exists when the patient says it does.

In the past, children did not receive adequate pain relief; it was thought that children do not feel pain the same way as adults.

- Research has shown that children feel and remember pain
- Children demonstrate anticipatory fear when taken to a location where they once experienced pain

**Recognize** that children often do not complain of pain because they are afraid the injection to relieve that pain will hurt more than the pain itself.

A variety of factors can affect a child's response to pain, including:

- Culture
- Developmental level
- Previous experience with pain
- Presence of the caregiver
- Fear and expectations
- Teaching or preparation

**Clinical manifestations** of pain in children can be remembered as the ABCs of pain:

- A**cute physiologic indicators: Pain stimulates the adrenergic nervous system, causing a stress response as evidenced by tachycardia, tachypnea, hypertension, dilation of pupils, pallor and increased perspiration
- B**ehavioral indicators: Pain related behaviors may mimic signs of fear and anxiety in the child; commonly observed behaviors include: restlessness and agitation or hyperalertness, short attention span, irritability, facial grimacing, punting and biting of lips, guarding of painful area,

posturing or immobility, rubbing the painful area, lethargy or withdrawal and sleep disturbances.

**Consequences of pain:** Unrelieved pain is stressful and a prolonged stress response has physiologic consequences, including: respiratory changes resulting in alkalosis, decreased oxygen saturation, and retention of pulmonary secretions; neurologic changes resulting in change in sleep patterns, increased blood glucose and cortisol levels and tachycardia; and metabolic changes leading to increased fluid and electrolyte losses.

A child may not be able to verbalize the existence of pain.

- Careful, comprehensive assessment by the nurse is important
- The goal of pain assessment is to collect accurate data about the location and intensity of pain and its effect on the child's overall well-being
- Important questions to consider during the data collection process include:
  - What is happening to cause pain?
  - What external factors could be causing pain?
  - Is the child exhibiting any acute physiologic or behavioral indicators of pain?
  - How is the child responding to the situation?
  - How does the child or parent rate the pain?
- A child's response, verbal description and understanding of pain vary by developmental stage

## pain assessment in children

Developmental Stage	Behavioral Response	Verbal Description	Understanding
Infants	Crying, irritability, withdrawal or pushing away; restless sleeping; poor feeding behaviors	Cries	No apparent understanding, yet when exposed to repeated pain, some demonstrate breath-holding when approached by care provider; older infants show anticipatory fear
Toddlers	Become quiet and exhibit regressive behavior; uncooperative, resists with entire body; fear response may cause to seek a safe place (playroom)	Cry and scream; unable to describe intensity or type of pain	Demonstrate fear of painful situations; use common words such as "too-boo" or "OWIE" for pain
Pri-Schoolers	Active physical resistance; strike out physically and verbally when hurt; low frustration level; become quiet	May believe pain is obvious to others; can identify the location and intensity of pain	Pain is related to hurt or injury, not illness; often believe pain is punishment for bad behavior or thoughts
School Age	Passive resistance; clenching fists, holding body rigid; or withdraw emotionally; may deny pain to be "braver" or avoid further procedures; withdrawn, may stare at television	Can describe pain location, intensity and describe its physical characteristics	Understand relationship between pain and illness but not the cause of the pain; older children can relate psychological pain to loss and hurt feelings
Adolescents	Fear loss of control; may refuse or over request meds; increased muscle tension; want to behave in a socially accepted or adult manner	Sophisticated description of pain experience	Can describe a complex understanding of the nature of physical and mental pain and relate to other's pain

# Pediatric Nursing Care Nclex Study Guide

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