

Nursing Care Package for child with acute respiratory failure secondary to suspected swine flu (that will remain at DGH for intensive care provision)

Check all parameters using APLS guidelines 2006 (see PIC website)

Highlighted in blue are specific to children.

Respiratory/Cardiovascular/Renal

<ul style="list-style-type: none"> • Unable to maintain own airway • Inadequate respiratory effort/efficacy 	<ul style="list-style-type: none"> • Maintain patent airway • Oxygen levels maintained within normal limits for child. 	<ul style="list-style-type: none"> • Monitor respiratory rate • Monitor oxygen saturations and requirements hourly • Monitor EtCO₂ levels continuously • Perform suction PRN and not as routine(measure catheter size and length required for adequate suction)(Pre-oxygenate in infants)(Ensure pressures are appropriate) • Record ventilator settings hourly • Bag as required with ambu bag(Ayres t-piece only if skilled) • Use HME filters to provide humidity • Ensure minimal deadspace (short catheter mount small filters only)
<ul style="list-style-type: none"> • Inability to maintain adequate cardiac rate rhythm • Inability to maintain adequate cardiac output. • Disturbance of electrolytes and or fluid balance 	<ul style="list-style-type: none"> • Early detection and correction • Maintain adequate cardiac output • Maintain electrolyte balance 	<ul style="list-style-type: none"> • Monitor ECG rate and rhythm • Monitor for signs of compromised cardiac output • Prolonged capillary refill time • Increasing heart rate • Reducing urine output • Increasing toe core gap • Monitor and record CVP • Observe for electrolyte imbalance (children are more sensitive to changes in electrolyte levels)

<p>Compromised renal function resulting from</p> <ul style="list-style-type: none"> • Fluid electrolyte balance • Renal dysfunction • Disease process 	<ul style="list-style-type: none"> • To ensure adequate hydration • Maintain electrolyte balance 	<ul style="list-style-type: none"> • Record fluid balance hourly • Administer fluids as prescribed • Monitor urine output(weigh nappies if infant/catheter) 1ml/kg/hr • Daily urinalysis • Administer diuretics as prescribed (monitor electrolytes closely)
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GI/Nutrition/Neurological/General care/Family

<p>Unable to eat or drink</p> <ul style="list-style-type: none"> • Failure of normal GI function • Stressors to GIT from current illness 	<ul style="list-style-type: none"> • Maintain normal blood sugar • Maintain optimal nutritional status • To maintain normal function • To prevent gastric dysfunction 	<ul style="list-style-type: none"> • Introduce nutrition as per website guidelines • If naso-gastrically fed: Check position of tube prior to commencement of feeds and four hourly thereafter. <ul style="list-style-type: none"> • Stop feeds four hours prior to extubation. • Check blood sugars four hourly.
<p>Potential alteration in neurological status due to</p> <ul style="list-style-type: none"> • Illness • Medication • interventions 	<ul style="list-style-type: none"> • Prompt detection and reporting of deterioration in neurological status 	<ul style="list-style-type: none"> • Assess neurological status on admission • Report any changes in observations promptly • Administer anticonvulsant medications as prescribed • Observe for abnormal movement and record • APLS Pathway for children on website

<p>General paediatric care Safety of child</p>	<ul style="list-style-type: none"> • Periods of rest • Comfortable patient • Safe patient 	<ul style="list-style-type: none"> • Co-ordinate all care to allow for maximum rest • Provide mouth and eye care 2-4 hourly • Administer analgesia and sedation as per guidelines(see drug calculator cardiffpic website + drug calculation guide for nurses) • Refer to children BNF for all drug dosages in children • Use pressure relieving mattresses for all cases • Ensure cot sides elevated at all times • Maintain normo-thermia (use heaters in infants if necessary) • Check Intravenous and arterial sites hourly (avoid bandages) • Ensure Intravenous pumps are set at low pressure
<p>Parental family stress</p>	<p>To support and inform parents</p>	<ul style="list-style-type: none"> • Liaise with the medical staff in updating parents • Explain equipment, procedures and actions of drugs used • Encourage participation in care as able • Keep documentation maintained