NURSING PRACTICE.
SECTION «PEDIATRICS»

Teacher’s guide for the 3rd year
English medium students

СЕСТРИНСЬКА ПРАКТИКА.
РОЗДІЛ «ПЕДІАТРІЯ»

Методичні розробки
для аудиторної роботи викладачів
зі студентами 3-го курсу
медичного факультету

Затверджено
вченою радою ХНМУ.

Харків
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Topic № 1. Organization of the nurse’s office (nurse post).
Medical records, rules of filling in.

Amount of educational hours: self-dependent work – 9;
practical training – 1.

Contents
Knowledge of the functional responsibilities of the nurse and mastering of the basic skills of the nursing personnel will improve the quality of doctors' training. Because, in case of possible complications that may occur during performing of nursing manipulations, the doctor will not only be qualified to explain the technique of carrying them, but, if there is a need, he will be able to perform the assigned manipulation. The state system of preventive and curative care for children, which was adopted in our country, consists of three main functionally related links: children's polyclinic - children's hospital - children's sanatorium, therefore, knowledge of the structure and functions of medical institutions (including pediatric hospital and polyclinic) are necessary for the health care provider.

Specific goals
• to define functional responsibilities, main legislative and normative acts that regulate the work of nurses in the pediatric department;
• to demonstrate mastery of skills to organize the work of nurse office (nurse post) in pediatric department.

To know:
1. The structure and function of a pediatric hospital.
2. The organization of nurse’s work in the nurse post in children hospital.
3. Rules of transfer duty to next change.
4. The rules of storage and keeping of drugs in the nursing post.
5. Rules of storage and keeping medical tools in the nursing post.
6. Main records in the manipulation room.
7. Rules of storage and keeping drugs in the manipulation room.
8. Rules of storage and keeping medical tools in the manipulation room.
9. The rules of storage and keeping of high-potent and narcotic drugs.
10. The organization of the nursing work in the procedure room.
11. Rules of storage and keeping

Be able to:
1. Perform nurse’s work in pediatric department.
2. Organize of the nurse work of the nurse’s post in the pediatric department.
3. Fill out the documentation of the medical post nurse in the pediatric department.
4. Organize of the nurse work in the manipulation room.
5. Perform registration of drugs in the manipulation room in the pediatric department.
6. Check out the documentation in the manipulation room.
7. Organize of the nurse work in the procedure room.
8. Fill out the documentations of prescription records of high-potent and narcotic drugs.

**Providing an initial level of knowledge-abilities**
To apply the materials of the guidelines for independent extra-curricular activity of students to the subject 1.

**Materials needed for methodological support:**
1. Samples of functional responsibilities of pediatric nurses of a different profile.
2. Graphical patterns of individual issues of the theme:
   A. Graphical structure of the topic «Structure and function of a pediatric hospital» – Appendix 1.
   B. Graphical structure of the topic «The structure and function of a pediatric hospital in organization sanitary and epidemiological regime» – Appendix 2.
   C. Graphical structure of the topic «Medical records of medical post nurse» – Appendix 3.

**The technological card of the lesson**

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The estimated basis of the action in performance of the learning objectives of the topic (sections 4, 6):
1. Familiarity with the responsibilities of the nurse of the children's department:
   a) visit the office of the charge nurse of the department and familiarity with the job descriptions of nurses.
   b) familiarity with regulations that regulate the work of nurses
2. Introduction to the pediatric hospital:
   a) visit the offices of admission, infectious diagnostic, neonatal, young children, allergological, and immunological departments;
   b) familiarity with the work of the clinical, biochemical, immunological, and bacteriological laboratories;
   c) independent work in one of the departments with studying of the medical documentation of the department;
   d) filling in the diary.

Assignments for testing the final level of knowledge

Situational tasks

Task № 1
A nurse mixed up the vials, which were similar in appearance, and injected to the child instead of heparin a large dose of insulin that reduces the blood sugar level. As a result, the child has developed the hypoglycemic coma. How do you consider the actions of the nurse?
Answer: medical tort (negligence).

Task № 2
A boy of 5 years was sent to the hospital with a diagnosis of "acute leukemia" (malignant blood diseases). The father of the child was very upset, was taking Validol drug because of the pain in the heart. After an investigation the diagnosis of "acute leukemia" was not confirmed; the boy quickly recovered. The response of the father was- to call to account the doctor, who incorrectly diagnosed. What was the mistake that the doctor made while referring the child to the hospital?
Answer: It was necessary to warn the parents that there is only a suspect for malignant blood diseases; but in order to confirm or deny the diagnosis the child must examine carefully in the hospital.
Task № 3
A boy of 8 years was sent to the infectious hospital with the diagnosis of dysentery. The boy refused hospitalization addressing to the fact that he is disabled after polio; and other children will laugh at him. After a conversation with a doctor, the boy agreed to hospitalization. How do you think you can convince the child?

Answer: The doctor promised to hospitalize the child with his mother in an individual box.

Task № 4
A mother with a child of 1 year and 5 months went to a doctor with the complaints of the fever up to 37.3 C and appearance of the catarrhal symptoms. At age of 6 months the girl suffered from pneumonia with pleurisy. A doctor (under pressure of the parents) considered a condition of the child as a manifestation of the generalized infection – sepsis, and ordered a massive antibiotic therapy. The child's condition had not improved worsened appetite. What is a doctor’s error?

Answer: The doctor did not examine the child, unreasonably prescribed the treatment.

Task № 5
A girl of 11 years after an excessively detailed conversation about the possible abdominal pain, which is associated with the presence of worms, is experiencing a fear and discomfort. What caused the fear and discomfort to the girl?

Answer: Extra information about a danger of the worms (iatrogenic).

Task № 6
A mother of a child with severe disease, who is being treated in the infectious department, passed a toy with a nurse. A doctor noticed it and, in presence of the mother, made a remark in a rude manner. What is an error of the doctor?

Answer: Medical ethics and deontology are violated.

Task № 7
A boy of 12 years is being treated in the cardiological department; in a drawer of boy’s bedside table a doctor found 6 tablets. When the doctor asked what kind of pills it is and why they are there, the boy replied that the nurse gave the tablets to him, but he forgot to take them. What is an error of the nurse?

Answer: The nurse must control intake of pills.

Task № 8
During an examination of the children in a ward a doctor asked a nurse what kind of and how much fluid she used for an enema given to a child? In response to an explanation the doctor made a remark to the nurse in presence of the mother. What is an error of the doctor?

Answer: It is not allowed to make comments in presence of parents and children; this is a violation of medical ethics and deontology.
Task №9
A doctor came on call to a sick child. When the doctor tried to perform auscultation with a phonendoscope, the child was frightened and became restless. What should be a tactic of the doctor?
Answer: The doctor has to stop auscultation and demonstrate on somebody from the parents the absolute safety of the phonendoscope.

Task №10
A child of 7 years with the purulent meningitis needs to undergo a control lumbar puncture. How would be tactically correct to carry out this manipulation?
Answer: First of all, the doctor needs to convince the mother in the necessity of performance of this manipulation. Then, the doctor has to talk with the child calmly, encourage the child by saying how much he/she is strong and brave.

Task №11
During a doctor is examined a child in the allergy department. The child is suffering from asthma, suddenly deteriorated and was transferred to intensive care unit. The head of the department harshly made remarks to the doctor, who treated the child, because the doctor failed to adhere to the rules of personal hygiene. Question: Please provide two deontological errors.
Answers: 1. Usage by one of the attendant doctors some irritating cosmetic products (perfume, hairspray, etc.). 2. The head of department made the remark to the colleague in the presence of patients.

Task №12
A doctor of the pediatric department pointed out to a nurse on the appearance of pressure ulcers in a child; the nurse replied that she was conducting the wet cleaning of the department, besides caring for a sick child is not her responsibilities. Question: Who is right in this case?
Answer: The remarks of the doctor are absolutely fair because one of the main functional responsibilities of nurses is caring for a sick child, including prophylaxis of pressure ulcers.

Distribution points that can receive the student
The assessment of student’s knowledge is carried out according to the traditional 5-point scale.
The last class received scores added up, the average score is calculated that according to "Instructions for Student Assessment KNMU, 2015" are converted into scores ESCTS.
Topic № 2. Diagnostic procedures in pediatric hospital

Amount of educational hours: self-dependent work – 9;
practical training – 2.

Contents
In everyday life we should understand the term «patient care», such as the providing care that is responsive to individual patient preferences, needs (feeding, drinking, bathing, movement, and others.). However, the medical concept of "nursing" is interpreted more broadly. This concept implies a set of measures that includes the proper and timely execution of various medical appointments (the administration of medication, the urine test, the sputum culture test, gastric and duodenal intubations, the preparation for certain analysis – radiological, endoscopies, monitoring the patient and others). Therefore, nursing is an integral part of the whole treatment process that affects to a large extent its effectiveness.

Specific goals:
• to acquire nursing skills in the manipulation, procedure rooms and nurse’s post in the pediatric hospital;
• to demonstrate the skills of treatment and care of children;
• to demonstrate the basic principles of medical ethics and deontology.

To know:
1. The rules of filling in of appointment cards for laboratory tests.
2. The rules of preparing patients and the necessary equipment for stool ova and parasites test, coprology test, fecal occult blood test, bacterial overgrows syndrome.
3. The rules of patient and equipment preparing for urine test by Zimnitskiy, Nechyporenko, Addis-Kakovskiy and diagnostic value of these tests.
4. The rules of preparing of smears from oral pharynx and nose.
5. Technique for gastric lavage and taking gastric washings samples.
6. Technique for preparation of probes, catheters for manipulation.

Be able to:
1. To fill in appointment cards for laboratory tests.
2. To take urine from newborns and infants for laboratory tests and to demonstrate the usage of urine collector bag (urinal).
3. To prepare patients and equipment for stool ova and parasites test, coprology test, fecal occult blood test, bacterial overgrows syndrome.
4. To take smears from nose and oral pharynx for bacteriological test.
5. To prepare patients and necessary equipment for general and bacteriological sputum tests.
Providing an initial level of knowledge-abilities

To apply the materials of the guidelines for independent extra-curricular activities of students to the topic 2.

Materials needed for methodological support:
1. Examples of medical records from nurse’s post, manipulation and procedure room.
2. Documents, which regulate prescribing, recording and storage of potent, narcotic and toxic substances.

The technological card of the lesson

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The estimated basis of the action in performance of the learning objectives of the topic (sections 4, 6):

Familiarity with the responsibilities of the nurse of the children's department:
a) visit in the admission department, infectious-diagnostic department, neonatal department, department for young children, allergic and immunologic departments;
b) familiarity with the work of medical post nurse, manipulation nurse and procedural nurse in the pediatric department;

c) independent work in the department with the study of medical documents;

d) study the rules of filling main pediatric hospital medical records (the patient registration journal in the department, the history of patients, letter medical appointments, the nurse journal, the report journal of procedures and manipulations, the temperature sheet, the patient monitoring sheets (form № 004/y), the journal of transfer duty (form №068/y), filling sample documents.

e) fill in the diary.

Assignments for testing the final level of knowledge

Situational tasks

Task № 1

A child admitted to the hospital and the doctor asked the nurse to count the pulse of the child. The nurse felt the pulse of the right radial artery and said a number, but the doctor was not satisfied and repeated this process on his own. Why was the doctor not satisfied?

Answer: The first pulse is measured in both radial arteries, in order to determine its symmetry.

Task № 2

A 5-year-old child was assigned an antibiotic syrup for oral use. An open bottle of antibiotics kept in the refrigerator as instructed. The nurse under doctor's recommendations took a medicine from the refrigerator and gave the child 1 measuring spoon of the drug. What an error was committed by the nurse?

Answer: Giving medications by mouth provides their previous warming to room temperature.

Task № 3

A nurse measured the temperature of a one year old child per rectum, the performance by thermometry was 37.5 degrees Celsius. Then she gave the child an antipyretic. Is it right or not? Why?

Answer: The temperature is measured in the rectum to 0.5-1 degrees above the temperature in the armpit. In this case, the nurse committed two errors: incorrect evaluated the result thermometry, has introduced the drug without the consent of the doctor.

Task № 4

The senior nurse was asked to see a child complaining of the rash after the introduction of antibiotics, which quickly spread across the skin, swelling on the face. The nurse began to search for necessary drugs about 8 minutes. What mistake did she make?

Answer: Drugs for emergency aid must be kept on a separate shelf in the closet and be signed; this will save time and prevent the possibility of the error.
Task №5
The nurse in charge for the patient’s registration writes patients indicated name, child's age, address, previous diagnosis. What data the nurse do not indicate?
Answer: Who sent the patient to the hospital.

Task № 6
A nurse received narcotic drugs and hid them in the safe. At that moment she was summoned to the office of the head and she went to call. What an error was committed by the nurse?
Answer: She should have registered the narcotic drugs and then started the call.

Task № 7
A nurse after performing the cleansing enema washed her hands and performed other procedure. What an error was committed by the nurse?
Answer: After the procedure is necessary to make a mark in history.

Task № 8
During the transfer of duty the nurse forgot to tell his colleague about the appearance of the rash in the child after treatment for pneumonia. A nurse came to perform the antibiotic injection, but the child's mother expressed outrage, about not including in the rash prevention. Who made a mistake?
Answer: The previous nurse should have informed about it.

Task № 9
A Nurse dismantled the syringe after the intravenous injection and put it in a box for recycling, washed her hands and made a note about the implementation of the injection. What an error was committed by the nurse?
Answer: A syringe should be disinfected after the procedure before disposing of equipment.

Task № 10
A nurse executed an intramuscular injection twice and debrided the injection site with one cotton ball with alcohol. What error was committed by the nurse?
Answer: The place of injection should be processed twice, with two different cotton balls.

Distribution points that can receive the student
The assessment of student’s knowledge is carried out according to the traditional 5-point scale.

The last class received scores added up, the average score is calculated that according to "Instructions for Student Assessment KNMU, 2015" are converted into scores ESCTS.
Topic № 3. Treatment procedures in pediatric hospital

Amount of educational hours: self-dependent work – 9; practical training – 2.

Contents

The nursing process is generally accepted by professional nurses as the foundation for their practice. The diagnostic process begins with the collection of information and ends with an evaluative judgment about a patient’s health status. To carry out this process in nursing, one must make decisions about what information is important and in what areas responsibility exists for diagnosis. Nursing process for children involves basic steps, such as date collection, assessment, problem identification, planning for care, intervention and evaluation.

Specific goals

• to acquire nursing skills in the manipulation, procedure rooms and nurse’s post in the pediatric hospital;
• to demonstrate the skills of treatment and care of children;
• to demonstrate the basic principles of medical ethics and deontology.

To know:
1. The determination of the vital parameters of patients: pulse blood pressure in children of different age and filling in this data to the temperature chart.
2. Drug-free means for helping children with hyperthermia.
4. Rules of mustard plasters applying, use of hat-water buddle, a buddle of ice.
5. Rules of use pocket and stationary inhalers (nebulizer).
6. The method and technique of moistened oxygen supply and use of oxygen pillow.
7. Technique of gastric lavage, taking wash water for laboratory tests.

Be able to:
1. Measure the temperature, pulse and blood pressure and to fill this data in to the temperature chart in children of different age.
2. Use drug-free means for helping children with hyperthermia.
3. Prepare the equipment and to apply heat compress on the ear of the patient.
4. Prepare the equipment and to apply mustard plasters to the child.
5. Use hot-water boil and ice pack.
6. Prepare the equipment and to use pocket and stationary inhalers (nebulizer).
7. Give moistened oxygen to the patient and to use oxygen pillow.
8. Prepare the probes and tubes for manipulations.
Providing an initial level of knowledge-abilities

To apply the materials of the guidelines for independent extra-curricular activity of students to the subject 3.

Materials needed for methodological support:
1. Samples of functional responsibilities of pediatric nurses of a different profile.
2. Graphical patterns of individual issues of the theme:
   "Measurement of body temperature" – Appendix 1.
   "Mustard plasters use" – Appendix 2.
   "Ice pack use" – Appendix 3.
   "Hot-water bottle use" – Appendix 4.
   "Applying of heat compress" – Appendix 5.

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Familiarity with the responsibilities of the nurse of the children's department:

a) visit in the admission department, infectious-diagnostic department, neonatal department, department for young children, allergic and immunologic departments;

b) familiarity with the work of medical post nurse, manipulation nurse and procedural nurse in the pediatric department;

c) independent work in the department with study medical documents;

d) study the rules of filling main pediatric hospital medical records (the patient registration journal in the department, the history of patients (hospital sheet chart), letter medical appointments, nurse journal, the report journal of procedures and manipulation, temperature sheet, the patient monitoring sheets (form № 004/y), the journal of transfer duty (form №068/y), filling sample documents.

e) fill in the diary.

Assignments for testing the final level of knowledge
Situational tasks

Task № 1

The nurse examined the pulse of the 1 year child. The result was 130 beat per minute. A nurse summoned the doctor urgently and said that the child had tachycardia. What error was committed by the nurse?

Answer: The nurse did not take into account the age characteristics of heart beat rate in assessing the results.

Task № 2

A 5-year-old child was assigned an antibiotic syrup for oral use. An open bottle of antibiotics in the refrigerator as instructed. A nurses under the doctor's recommendations took a medicine from the refrigerator and gave the child 1 measuring spoon of the drug. What error was committed by the nurse?

Answer: Giving medications by mouth provides their previous warming to room temperature.

Task № 3

A nurse measured the temperature of a one year child per rectum, performance of thermometry was 37.5 degrees Celsius. Then she gave the child an antipyretic. Is it right or nor? Please, explain why.

Answer: The temperature which is measured in the rectum is to 0.5–1 degrees above the temperature in the armpit. In this case, the nurse committed two errors: incorrect evaluated the result thermometry; she has introduced the drug without the consent of the doctor.
Task № 4
Senior nurse was asked to see a child complaining of rash after the introduction of antibiotic, which quickly spread across the surface of the skin, and swelling on the face. The nurse began to search for necessary drugs. She did it about 8 minutes. What mistake did she make?

Answer: Drugs for emergency aid must be kept on a separate shelf in the closet and be signed, this will save time and prevent the possibility of an error.

Task № 5
A nurse dismantled a syringe after the intravenous injection, put it in a box for recycling, washed her hands and made a note about the implementation of the injection. What an error was committed by the nurse?

Answer: A syringe should be disinfected after the procedure, before disposal of equipment.

Task № 6
A nurse handled intramuscular injection site twice with the one alcohol cotton ball. What an error was committed by the nurse?

Answer: The place of injection must be processed twice, but by two cotton balls.

Task № 7
A nurse measuring blood pressure for a 6 year old child took tonometer that was used to measure pressure in 12 years old child. What an error was committed by the nurse?

Answer: Cuff should be used to measure the blood pressure according to age.

Task № 8
A nurse performing intramuscular injection after puncture of the skin quickly introduced drugs. What an error was committed by the nurse?

Answer: After puncture of the skin nurse should check if the needle does not hit vessels and pull the plunger.

Task № 9
A child admitted the hospital and the doctor asked the nurse to count the pulse of a child. The nurse felt the pulse of the right radial artery and called a number, but the doctor was not satisfied and repeated this process himself. Why was doctor not satisfied?

Answer: The first pulse is measured in both radial arteries, in order to determine its symmetry.

Distribution points that can receive the student
The assessment of student’s knowledge is carried out according to the traditional 5-point scale.
The last class received scores added up, the average score is calculated that according to "Instructions for Student Assessment KNMU, 2015" are converted into scores ESCTS.
**Topic № 4. Responsibilities and work of manipulation nurse at pediatric department**

**Amount of educational hours:**
- self-dependent work – 9;
- practical training – 2.

**Contents**

Knowledge of the functional responsibilities of the nurse and the mastery of basic skills of nursing staff enhance the quality of doctor’s study. Because, in case of possible complications that may arise nurse during manipulations, the doctor will not only qualified appliances to explain the technique of them, but if necessary, a doctor will execute the manipulations. In addition, in case of the reform of health care and medical care physician practitioner must have basic manipulation techniques such as subcutaneous, intramuscular and intravenous injections and other medical procedures in children of all ages.

**Specific goals**

- to define responsibilities and main legislative and normative acts that regulate the work of pediatric nurses;
- to demonstrate mastery of skills to organize the work of pediatric nurses.

**To know:**
1. The rules of introduction of drugs through mouth.
2. Preparation the table for manipulation for use.
3. The technique of subcutaneous, intramuscular and intravenous injections.
4. An antibiotic’s dose calculation.
5. The rules of filling in of venous line (intravenous fluid giving set).
6. Basic requirements for disinfection and cleaning of used equipment before sterilization.
7. Work with drug chart.

**Be able to:**
1. Introduce the drugs to children of different age through mouth.
2. Demonstrate the method of executing subcutaneous injection to a child.
3. Demonstrate the method of executing intramuscular injection to a child.
4. Demonstrate the method of executing intravenous injection to a child.
5. Calculate antibiotic’s dose and dilute it for injection.
6. Prepare the venous line and to demonstrate the method of executing intravenous infusion to a child.
7. Prepare solutions for parenteral administration and to demonstrate the rules of work with disposable syringes after use.
Providing an initial level of knowledge-abilities

To apply the materials of the guidelines for independent extra-curricular activities of students to the subject 4.

Materials needed for methodological support:
1. Samples of functional responsibilities of pediatric nurses of a different profile.
2. Graphical patterns of individual issues of the theme:
   "Algorithm intradermal injection" – Appendix 1.
   "Algorithm subcutaneous injection" – Appendix 2.
   "Algorithm intramuscular injection" – Appendix 3.
   "Algorithm intravenous injection" – Appendix 4.

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The estimated basis of the action in performance of the learning objectives of the topic (sections 4, 6):

Familiarity with the responsibilities of the nurse of the children's department:

a) to visit admission, infectious-diagnostic, neonatal, young children, allergy and immunologic departments;

b) to familiarize with the work of procedural nurse in the pediatric ward;
c) independent work in one of the branches of study clinic algorithm implementation procedures;

d) study the rules of filling main pediatric hospital medical records (The patient registration journal in the department, the history of patients (hospital sheet chart), letter medical appointments, nurse journal, the report journal of procedures and manipulation, temperature sheet, the patient monitoring sheets (form № 004/y), the journal of transfer duty (form №068/y), filling sample documents.

e) fill in the diary.

Assignments for testing the final level of knowledge

Situational tasks

Task № 1

The nurse found out intense redness on the sacrum when changing the soiled laundry of a seriously ill patient. What care the patient need?

*Answer:* Management of the wound with A 70 % alcohol solution.

Task № 2

The physician prescribed the mustard plasters to a patient, but in the evening patient’s body temperature was increased up to 39 ºC. The patient persuades the nurse to use mustard plasters. What the nurse should do?

*Answer:* The nurse should explain to the patient that the mustard plasters are contraindicated in cases of fever.

Task № 3

A nurse prepared jars, wick, broadcast, cotton, and matches for the production of cans. What is wrong?

*Answer:* The wick is not used for cans applying.

Task № 4

The nurse applied to the patient an ice pack and said that he should keep it until all ice will melt. Is it correct?

*Answer:* Using of the ice pack should be regulated.

Task № 5

The nurse found that the cheesecloth, bordered to the skin is dry after removal of warm compress. How do you evaluate the effectiveness of the procedure?

*Answer:* The procedure is not effective.

Task № 6

The appointment card added to ajar with sputum indicates surname, first name, middle name, department, ward and date. Are all the necessary information listed?

*Answer:* The purpose of the study is not indicated and age of a patient.
Task № 7
The nurse gave to the patient a clean dry jar for collecting sputum for bacteriological test. Is it correct?
Answer: The jar for bacteriological test should be sterile.

Task № 8
A patient develops the cyanosis and was gasping, after the introduction of large gastric probe (for gastric lavage). Why did the patient’s appearance change? What tactics of nurse should be done?
Answer: The probe fell into the trachea. The probe must be pulled out immediately.

Task № 9
After inserting cleansing enema a little amount of water was released from the rectum. How must be interpreted the effectiveness of enema?
Answer: Enema performed efficient.

Task № 10
The nurse brought the urine to the laboratory after 11 hours in the morning, which was collected in the over all analysis. Soon, the laboratory reported that urine of the patient unsuitable for study. What were the reasons?
Answer: It is deliver laboratory analysis on time.

Task № 11
The patient was not urinating for collecting urine samples by Zimnitsky test from 3 hours to 6 hours. Which bottle should be used to collect urine during urination in 7 hours?
Answer: The bottle where urine collected from 6 h. up to 9 hours.

Distribution points that can receive the student
The assessment of student’s knowledge is carried out according to the traditional 5-point scale.
The last class received scores added up, the average score is calculated that according to "Instructions for Student Assessment KNMU, 2015" are converted into scores ESCTS.
Topic № 5. Final class

Amount of educational hours: self-dependent work – 2; practical training – 2.

Contents

Evaluation of the knowledge obtained by a student and the level his/her practical training is one of the final stages of student learning activities and definition of learning success.

Evaluation makes it possible to assert that the student receives the necessary knowledge, understanding, skills and competence. Competence means the proven ability of students to use knowledge, learned behavior and personal skills in educational or work situations. Competence is the ability to transfer knowledge into practice.

The forms of monitoring and evaluating are listed pursuant to the program of the work practice ”Nursing practice” and the Instruction on the evaluation of academic activities in the course of the European credit transfer system in the organization of the educational process”.

Specific goals:

• to prepare for evaluation by the teacher mastering of the skills of nursing care for the child, depending on age.

To know:

1. The standards of medical technology in the work of a nurse.
2. The principles of treatment and care of sick children in the pediatric hospital.
3. The standards of filling of medical records in the pediatric hospital.
4. The requirements of medical ethics and ethics in dealing with colleagues, patients and their relatives based on their psychological characteristics, and measures to create a healthy psychological climate in the medical environment.

Be able to (list of practical skills to the subject):

1. Demonstrate the skill to give a drug for internal use child of a certain age.
2. To demonstrate the possible methods of measuring the temperature of a child and the skill to record results in temperature sheet.
3. Conduct evaluation of pulse and blood pressure of a child.
5. Calculate the antibiotic dose and dilute it for an injection.
6. Prepare solutions for parenteral administration and to demonstrate the rules of work with disposable syringes after use.
7. Prepare the appropriate equipment to demonstrate on dummies:
   - the rules of anthropometric measurements (height, weight, chest and abdomen contour) to a child depends on age;
   - the rules of heat compress applying on the ear;
the rules of mustard plaster, hot-water-bottle, ice pack to a child;
the rules of moist oxygen supplying to a child depends on age;
the rules of pocket inhaler and nebulizer;
the rules of instilling drops into nose, eyes and ears;
the rules of taking smears from nose and oral pharynx;
the rules of gastric lavage executing to a child depends on age;
the rules of giving subcutaneous injection;
the rules of giving intramuscular injection;
the rules of giving intravenous infusion;

Providing an initial level of knowledge-abilities
To apply the materials of the guidelines for independent extra-curricular activities of students to the subject 5.

Materials needed for methodological support:
1. Methodological recommendation for topics 1, 2, 3 and 4.
2. Recommended literature (refer to methodological recommendations to topics 1, 2, 3 and 4).

The technological card of the lesson

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<th>№</th>
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<th>Tutorials</th>
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</table>

The estimated basis of the action in performance of the learning objectives of the topic (sections 4, 6):
1. Control student’s knowledge by tests.
2. Control practical skills mastering.
3. Control of the theoretical knowledge.
Assignments for testing the final level of knowledge
Theoretical questions for the discipline:
1. What are the deontological features of nurse’s work with the children and their relatives?
2. What are the rules of nurse’s work in pediatric department? Which documents settle these rules?
3. What are the main functional responsibilities of nurse pediatric hospital?
4. How should be organized the medical nurse-post in the pediatric hospital?
5. What documentation is filled by floor nurse and what are rules of filling of these documents?
6. How the duty transfer from one medical shift to another should be done?
7. What are the rules of manipulation room organization? What is the main documentation of manipulation room?
8. What are the rules of storage of medicines and tools in the manipulation room and at the nurse’s post?
9. What are the rules of prescription, administration, recording and storage of potent, narcotic and toxic substances?
10. What are the rules of nurse’s work in procedure room?
11. What are the rules of keeping tools in procedure room?
12. How to prepare the child and equipment for stool ova and parasites test, coprological test, fecal occult blood test and bacterial overgrows syndrome.
13. What are the rules for taking the urine test using by Zimnitskiy, Nechiporenko and Addis-Kakovsky methods? What is their diagnostic value?
14. What is the technique of taking the nasopharyngeal swab for culture performed?
15. How is gastric lavage performed? Tell about the technique of taking gastric washings (gastric lavage) for laboratory test.
16. How should medical equipment (probes, catheters, etc.) be prepared for use?
17. What are the rules of heat compress applying?
18. What are the rules of mustard plasters, hot-water bottle and ice pack use?
19. What are rules of checking temperature, pulse, blood pressure in children of different age?
20. What are the rules of pocket inhaler and nebulizer use?
21. What are the technique of moistened oxygen and oxygen pillow use?
22. How the registration of children admitted to the department is performed?
23. What part of history is filled by a nurse?
24. What are the rules of a nurse’s work with drug chart?
25. What are the rules of oral drugs administration?
26. How to prepare the manipulation table for use?
27. What is the technique of subcutaneous, intramuscular and intravenous injections?
28. What are the rules of antibiotic’s dose calculation for children?
29. How to prepare the venous line for drug infusion?
30. What are the basic requirements for disinfection and cleaning of used equipment before sterilization?
The methods of student’s evaluating

The final class (hereinafter - FC) is conducted after a logically completed part of the course which consists of a set of educational elements of the working program combining all types of training (theoretical, practical etc.) as well as the elements of education and vocational training (academic course, all types of practices, assessment), which are implemented by the respective forms of the academic process.

The final class (FC) is held by the teacher of an academic group. The forms in which the FC is conducted should be standardized and should include supervision of all types of training (theoretical, practical, self-practice and others) envisaged in the working program of course. Students are estimated by traditional grades at the final class.

Aspects to be checked:
1) the level of knowledge development regarding the scientific and theoretical content of the section acquired during classes (the form of tests, structured tasks etc.);
2) the level of development of compulsory skills and abilities that are a part of the section;
3) completion of the student’s individual tasks;
4) the amount of educational material attributed to self-training as separate educational topics (controlled in the form of tests).

The grade for the section consists of the sum of grades for current educational activity (in points) and of the grade for the final class (in points), which is awarded in the course of the evaluation of theoretical material and practical skills in accordance with the list determined by the practice program.

The maximum number of points which may be consequently obtained by students is 200 points; this includes 120 points for current educational activity and 80 points for the final lesson.

Current educational activity of students is controlled during practical classes according to specific goals in the course of each practical class as well as during self-training in the hospital department. It is recommended to apply the following means of diagnostics of the students’ level of readiness: control of practical skills, solving cases and test control of theoretical knowledge.

The current assessment of students on respective topics is conducted in the traditional 4-point grade scale ("excellent", "good", "satisfactory" and "unsatisfactory") with further conversion into a multiscore scale.

The grade "Excellent" is given when the student knows the program in toto, illustrating the answers with various examples; gives clear and comprehensive answers without any hints; delivers the material without any inaccuracies or errors; performs practical tasks of a different degree of complexity.

The grade "Good" is given when the student knows the whole program and understands it well, gives correct, consistent and structured but not completely comprehensive answers to questions, although he is able to answer additional questions without mistakes; solves all cases and performs practical tasks experiencing difficulties only in the most complex situations.
The grade "Satisfactory" is given to the student based on his satisfactory level of knowledge and understanding of the entire subject. The student is able to solve modified tasks with the help of hints; solves cases and applies practical skills experiencing difficulties in simple cases; is unable to deliver a consistent answer, but answers direct questions correctly.

The mark "Unsatisfactory" is given when the student's knowledge and skills do not meet the requirements of the grade "satisfactory".

Given the number of practical classes the grades are converted into the multiscore scale as follows:

- The mark "Excellent" – 72–80 scores.
- The mark "Good" – 60–71 scores.
- The mark "Satisfactory" – 50–59 scores.
- The mark "Unsatisfactory" – 0 scores.

**Conversion of the average grade for current activity into a multiscore scale.**

The conversion is performed under the "Instruction on the evaluation of academic activity of students..." (Table 1).

**Table 1**

<table>
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<td>4.29–4.32</td>
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The final semester control is carried out after the completion of the discipline in the form of grading test, which for Practice is the sum of points from all branches of the discipline.
Навчальне видання

СЕСТРИНСЬКА ПРАКТИКА. РОЗДІЛ «ПЕДАТРІЯ»

Методичні розробки для аудиторної роботи викладачів зі студентами 3-го курсу медичного факультету

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