

Pediatric Nursing Process (PNP)

Preparation and Triage

- Activate team
- Prepare the room and any special equipment
- Don PPE and consider need for decontamination or isolation

Across-the-Room Observation

- Uncontrolled bleeding? Reprioritize to <C> ABC
- Identifies the three components of the Pediatric Assessment Triangle AND categorizes the patient as "Sick, Sicker, or Sickest"

Primary Survey [ABCDEFG] "When you mess, reassess"

A** Alertness (A1) and Airway (A2)

- Maintain cervical spinal stabilization (If trauma is suspected)
- AVPU (Alert, Verbal, Pain, Unresponsive)
- Assess airway patency (at least FOUR)

B** Breathing and Ventilation

- Assess breathing effectiveness (at least FOUR)

C** Circulation and Control of Hemorrhage

- Assess central and peripheral pulse, skin color/temperature/ moisture and capillary refill (all THREE)
- Assess for uncontrolled hemorrhage, central pulse, skin color/temperature/ moisture and capillary refill (Assess all FOUR if trauma)

D** Disability (Neurologic Status)

- Glasgow Coma Scale
- Pupils
- Consider head CT* or blood glucose

E* Exposure (E1) and Environmental Control (E2)

- Remove clothing and inspect for uncontrolled hemorrhage or obvious signs of illness or injuries
- Provide warmth

**Double starred items must be completed IN ORDER prior to moving to the next step

F Full Set of Vital Signs (F1) and Family Presence (F2)

G Get Monitoring Devices (G1) and Give Comfort (G2) [LMNOP]

- L Labs: blood typing, blood gases, and lactate
- M Monitor
- N Naso- or orogastric tube
- O Assess pulse Oximetry and capnography (required if sedated or intubated)
- P* Pain assessment AND management

Reevaluation for Transfer to Trauma Center or Preparation for Definitive Treatment

Secondary Survey [HI]

H History (H1) and Head-2-Toe (H2) Exam

- History (H1) – Prehospital report, SAMPLE
- Head-2-Toe Assessment (H2)

I* Inspect Posterior Surfaces

- Unless contraindicated by suspected spine or pelvic injury – turn, inspect & palpate, remove longboard

Anticipated Interventions or Diagnostics

- At least THREE

Just Keep Reevaluating

- Vital signs
- Identified injuries and effectiveness of interventions
- Primary assessment
- Pain

Definitive Care or Transport