

CLARK COLLEGE DEPARTMENT OF NURSING
NURSING DATA BASE - Camas School – Pediatrics

PATIENT ASSESSMENT: Past/Present significant medical Hx _____

Student _____ Module _____ Date _____ Dx _____

Patient: M F Age: ALLERGIES:	Room: Date:	Medication: Dosage: Route Time Purpose
Weight: _____ Diet: Activity:	TREATMENTS	Side Effects:
Insurance:		
Special Treatments:		Prioritized Nursing Diagnosis
Social/Family History:		1.
		2.
Self Care Skills: Yes <input type="checkbox"/> No <input type="checkbox"/>		3.
Immunizations Up-to-date Yes <input type="checkbox"/> No <input type="checkbox"/>		4.
Summary Report:		Problem behaviors and ways to deal with them:
Classroom behavior:		Childs strengths and weaknesses:
Social Skills:		
Skills being worked on:		
Preferred activities:		

Assessment Flow Sheet Date:	Norms for Age	Day 1	Day 2
COGNITIVE-PERCEPTUAL LOC (PERLA, reflexes)			
Sensory (Screening results; vision, hearing, scoliosis)			
NUTRITIONAL-METABOLIC Integumentary			
Diet, weight, hydration, incision, IV's - fluid, rate, site			
ACTIVITY - EXERCISE Motor (grips, gait, movement, limitations)			
Respiratory (rhythm, rate effort, lung sounds, O ₂)			
Cardiovascular (rhythm, rate, apical & peripheral pulses, capillary refill)			
ELIMINATION - G.I. (bowel sounds, distention, flatus, BM, describe abdomen)			
Drains, tubes, etc.			
HEALTH PERCEPTION – MGMT (Learning Needs)			
SLEEP – REST (Usual pattern of sleep)			
SELF-PERCEPTION - SELF-CONCEPT			
ROLE RELATIONSHIP			
COPING - STRESS TOLERANCE			
VALUES - BELIEF/CULTURAL			
DEVELOPMENTAL ABILITIES			