

Age-Specific Guidelines

INFANT: Birth to One-Year

CHARACTERISTICS	COMMUNICATION	SIGNS OF NEGLECT/ABUSE	COMFORT NEEDS AND SAFETY
<ul style="list-style-type: none"> • Crying is communication. • Aware of sounds (blinks, startles, or moves). • Demonstrates visual regard for environment but focal vision is limited; more visually responsive to red, white, and black colors. • Signs of stress may include: <ul style="list-style-type: none"> ○ Upper and lower extension ○ Facial grimacing ○ Crying ○ Suckling in the absence of oral stimuli ○ Finger splaying; “saluting” <p>PHYSIOLOGIC PARAMETERS:</p> <ul style="list-style-type: none"> • Heart rate – 120-160 beats/minute • Respiratory rate – 30-60 breaths/minute • Blood pressure – 74-100 Systolic/ 50-70 diastolic 	<ul style="list-style-type: none"> • 100% dependent; unable to communicate needs • Use soft voices to minimize stress in the environment • Include the help of a parent when providing care whenever possible or appropriate <p>TEACHING:</p> <ul style="list-style-type: none"> • Explain procedures to the parent(s) of guardian 	<ul style="list-style-type: none"> • Failure to thrive • Dull and inactive; excessively passive or sleepy • Bruises on welds on buttocks, thighs, or areas of torso • Squeeze or pinch marks • Fractures and dislocation 	<ul style="list-style-type: none"> • Nurse must accompany patient when he/she is transported to and from unit • During radiographic imaging, ALARA (as low as reasonably allowable) radiation precaution procedure must be implemented • Never leave patient exposed to cold • Hold patient securely • Implement mechanisms to prevent injuries (e.g. Side rails, etc.) • Keep areas clean and safe • Reduce environmental noise and excess lighting • Secure patient following procedure and/or wrap tightly for infant stabilization • Closely monitor vital stats (i.e., o2 saturation level, heart rate and respiratory rate) during periods when patient is exerting effort and energy • Monitor for over stimulation/signs of stress

Age-Specific Guidelines

CHILD: One-Year to 12-Years

CHARACTERISTICS	COMMUNICATION	SIGNS OF NEGLECT/ABUSE	COMFORT NEEDS AND SAFETY
<ul style="list-style-type: none"> • Crying is communication. • Aware of sounds (blinks, startles, or moves). • Demonstrates visual regard for environment but focal vision is limited; more visually responsive to red, white, and black colors. • Signs of stress may include: <ul style="list-style-type: none"> ○ Upper and lower extension ○ Facial grimacing ○ Crying ○ Suckling in the absence of oral stimuli ○ Finger splaying; “saluting” <p>PHYSIOLOGIC PARAMETERS:</p> <ul style="list-style-type: none"> • Normal heart rate/minute 75-140 • Blood pressure range, systolic 80-120, diastolic 50-80 • Normal respiratory rate/minute 18-40 	<ul style="list-style-type: none"> • Allow caregiver to remain with child as much as possible. • Fully educate caregiver(s) on reasons for therapy. • Speak and play with young children to reduce stress • Reassure often that the procedure is not punishment and there is nothing wrong with feeling sad and angry • Keep explanations of procedures short and simple • Explain what the child should expect before initiating the procedure • Be creative...allow the child to feel like he/she is an essential contributor to the procedure. • The child may feel more comfortable if he/she is allowed to “pretend” or “imagine” <p>TEACHING</p> <ul style="list-style-type: none"> • Explain procedures in advance using correct terminology • Explain equipment • Allow child to have some control • Encourage child to verbalize 	<ul style="list-style-type: none"> • Failure to thrive • Unusual fearfulness (fear of parents or fear of going home) • Signs of malnutrition (e.g. thin extremities, abdominal distension, lack of subcutaneous fat) • Unclean and/or inappropriate dress • Frequent injuries • Feeding disorders such as self-induced vomiting • Habitual, uncontrollable vomiting after feeding • Self-stimulatory behaviors (e.g. rocking, self-inflicted pain, etc.) • Inappropriate pragmatic skills (e.g. lack of eye contact, poor socialization) • Sleep disorders and/or “wetting the bed” • Inappropriate reaction to injury. • Delayed emotional, intellectual, and speech and language development • Unexplained scars or bruises or markings indicative of the following: <ul style="list-style-type: none"> ○ Burn with object (e.g. cigarette, iron, stove burner) ○ Burn with scalding water ○ Injury caused from abuse with objects (e.g. belt buckle, wire hanger, chain, etc.) ○ Human bites ○ Lacerations and abrasions on back of arms, legs, torso, face, or external genitalia. 	<ul style="list-style-type: none"> • Encourage caregiver(s) to accompany patient when he/she is transported to and from unit ** If in intensive care, nurse may need to accompany patient during transportation • Provide supervision as appropriate • During radiographic imaging, ALARA (as low as reasonably allowable) radiation precaution procedure must be implemented • Implement mechanisms to prevent injuries (e.g. side rails, etc.) • Keep areas clean and safe • Reduce environmental noise and excess lighting • Provide reassurance

Age-Specific Guidelines

ADOLESCENT: 12- to 19-Years

CHARACTERISTICS	COMMUNICATION	SIGNS OF NEGLECT/ABUSE	COMFORT NEEDS AND SAFETY
<ul style="list-style-type: none"> • Strong sense of right and wrong • Fears separation, failure, disability/death, forced dependency, bodily injury, and pain • Signs are stress may include: <ul style="list-style-type: none"> ○ Anxiety ○ Withdrawal ○ Depression ○ Regression ○ Dependent behavior • Authority figure may prompt: <ul style="list-style-type: none"> ○ Criticism ○ Argumentative behavior ○ Self-Consciousness <p>PHYSIOLOGIC PARAMETERS:</p> <ul style="list-style-type: none"> • Normal heart rate/minute 60 – 100 • Blood pressure range, systolic 94-140, diastolic 62-88 	<ul style="list-style-type: none"> • Give simple but detailed explanation of what to expect from procedure • Be honest • Warn the adolescent if the procedure is going to hurt • Allow patient/family/caregivers to remain with adolescent as much as possible • Reassure often that the procedure is not punishment • Do not be aggressive or forceful with treatment; respect relationship barriers that the adolescent may construct; allow time to develop trust • Encourage discussion of feelings and provide information concerning the illness or procedure • Peers are important; allow peer visitation • Respect privacy • Involve adolescent in procedure <p>TEACHING</p> <ul style="list-style-type: none"> • Allow adolescent to maintain control • Provide essential teaching based on how the individual learns best • Present explanations in a logical manner; use visual aids; provide other materials for review 	<ul style="list-style-type: none"> • Extreme behavior (e.g., overly compliant and passive versus aggressive and demanding) • Suicide attempts; substance abuse • Suggestive markings which may include: <ul style="list-style-type: none"> ○ Burns ○ Bruises/welts ○ Fractures/Dislocations ○ Lacerations/abrasions • Indiscriminate friendliness and displays of affection • Sexually transmitted disease (STD) • Recurrent urinary tract disease (UTI) • Pregnancy in young adolescent • Poor or atypical pragmatics (i.e., eye contact, initiating conversation, body language, etc.) • Running away from home 	<ul style="list-style-type: none"> • Encourage significant other(s) to accompany patient when he/she is transported to and from unit • Provide supervision as appropriate • During radiographic imaging, ALARA (as low as reasonably allowable) radiation precaution procedure must be implemented • Implemented mechanisms to prevent injuries (e.g., side rail, etc.) • Keep areas clean and safe

Age-Specific Guidelines

ADULT: 20- to 65-Years

CHARACTERISTICS	COMMUNICATION	SIGNS OF NEGLECT/ABUSE	COMFORT NEEDS AND SAFETY
<p>FOR YOUNG ADULTS:</p> <ul style="list-style-type: none"> • Complete independence from parents maybe be a factor • Body image is a main focus • Completion of physical maturation may have occurred <p>FOR MIDDLE-AGED, OLDER, & GERIATRIC ADULTS:</p> <ul style="list-style-type: none"> • There may be concern over losing youthfulness, vitality and possibly, their partner's love • Stress may include: <ul style="list-style-type: none"> ○ Finances ○ Family dynamics/relationship ○ Career ○ Health and well-being <p>FOR GERIATRIC ADULTS:</p> <ul style="list-style-type: none"> • Memory loss and confusion may be present • Increased risk for falls and injuries exists due to decreased sense of balance and changes in fine motor capabilities • Increased insecurity is evident with changes in mental status, orientation, etc • Changes in visual and hearing acuity are evident <p>PHYSIOLOGIC PARAMETERS:</p> <ul style="list-style-type: none"> • Normal heart rate/minute 60 – 100 • Blood pressure range, systolic 95 – 140, diastolic 60 – 90 • Normal respiratory rate/minute 12 – 15 	<ul style="list-style-type: none"> • Give explanation of what to expect from procedure • Be honest • Warn is the procedure is going to hurt • Allow family to participate as much as possible and when appropriate • Do not be aggressive or forceful with treatment; demonstrate respect for patient at all times • Encourage discussion of feelings and provide information concerning the illness or procedure <p>TEACHING</p> <ul style="list-style-type: none"> • Provide essential teaching based on how the individual learns best • Involve individual/significant other in plan of care • Encourage as much self-care as possible • Teach skills to prevent injury and ensure a safe living environment 	<ul style="list-style-type: none"> • Suggestive markings which may include: <ul style="list-style-type: none"> ○ Burns ○ Bruises/welts ○ Fractures/dislocations ○ Lacerations/abrasions • Conflicting explanations of injuries • Defensive behavior by patient and/or caregiver when asked about problems • Signs of depression: <ul style="list-style-type: none"> ○ Insomnia ○ Frequent crying ○ Extreme anxiety ○ Talk of suicide • Poor hygiene and grooming • Untended bedsores • Loss of weight, malnutrition, dehydration • Unexplained genital infections • Dwindling financial resources 	<ul style="list-style-type: none"> • Encourage significant other(s) to accompany patient when he/she is transported to and from unit • Provide supervision as appropriate (assist with ambulation as needed) • During radiographic imaging, ALARA (as low as reasonably allowable) radiation precaution procedure must be implemented • Implemented mechanisms to prevent injuries (e.g., side rails, etc.) • Keep areas clean and safe • Reduce environmental noise during treatment to lessen stimulation / distractions