- Reduces number of pathogens
- Referred to as “Clean techniques”
- Used in administration of:
  Medications
  Enemas
  Tube feedings
  Daily hygiene

★ Handwashing is number 1★

MEDICAL ASEPSIS

- Eliminates all pathogens
- Referred to as “Sterile technique”
- Used in:
  Dressing changes
  Catheterizations
  Surgical Procedures

SURGICAL ASEPSIS

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**CARE OF THE CHRONICALLY ILL CHILD**

★ Focus on child’s developmental age vs. chronological age.
★ Assist child/family to return to normal pattern of living.
★ Determine how child is/was cared for at home.
★ Promote child’s maximum level of growth and development.
★ Assess family response to child’s illness.
★ Involve family in care.
★ Encourage self-care.
★ Maintain routine if possible.

★ Nursing Diagnosis:
- Altered growth and development
- Risk for altered family process
- Anxiety / fear related to test / procedure
- Risk for injury
- Diversional Activity Deficit
- Impaired social interaction
- Self-care deficit
- Body image disturbance

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Charting Body Fluids

“Coach”
- Color
- Odor
- Amount
- Consistency
- How The Client is Tolerating It.

Nursing Diagnosis (DX):
- Fear related to experience, loss of control & unknown
- Knowledge deficit related to Pre Op - Post Op procedures.

Nursing Responsibilities:
- Preoperative teaching
- Record V/G
- Remove jewelry
- Remove nail polish
- Remove dentures, etc.
- NPO
- ID Band
- Skin prep
- ID family
- Chart completeness
- Informed consent signed

Pre Op Meds

Day of Surgery

Anesthesia
- General
- Regional

Nursing Considerations:
- Assessment of Client
- Given by Dr. or CRNA
- May cause ↓ BP
- Not for hypovolemic client

Know: The common Pre Ops & Desired Actions
DEHISCENCE / EVISCERATION

Dehiscence
Separation or splitting open of layers of a surgical wound

Evisceration
Extrusion of viscera or intestine through a surgical wound
Maslow’s Hierarchy of Basic Human Needs

Physiological Needs
- I’m warm, dry, fed and rested
- I feel all warm and squishy

Security and Safety
- I feel safe
- I feel on top of the world

Love and Belonging
- I like me...

Self-Esteem
- I feel all warm and squishy

Self-Actualization
- I feel on top of the world

PRE-OP
- Sterile Field
- Sterile Procedures

PERI OPERATIVE CARE
- Surgical Procedures
- Biopsies
- Catheterization
- Intravenous infusions
- Dressing changes

O.R. Client
- Age
- Weight
- Height

Leg Amputations
- Deep Breathing
- Turning
- Pain Meds
- Equipment
- NPO Policy
- Leg Exercises

THE CONSENT
- Dr. gives client explanation signed by Dr. Client & Witness
- Signed prior to Pre-Op meds remain permanent part of client’s chart

Chronic health problems
- Current drugs
- Allergies
- Perception of illness
- Current discomfort
- Religion
- Significant others

Psychological needs
- Medications
- Nursing Assessment
- Lab studies

Older clients have less reserve
- May need repeated explanation
- Scary stuff last

As a time most conducive to learn, involve parents
- Use correct terms
- Role Play

Talk to kids at their level in concrete terms
- Use correct terms
- Role Play

1. With Dr. determine client info
2. Evaluate client’s understanding of illness
3. Use terms client knows
4. Don’t overwhelm
5. Involve family
Pre Op Checklist
Day of Surgery

- Client teaching completed
- Consent form signed
- NPO
- In gown
- Allergy & ID Bands on
- No Jewelry - Bands taped
- Voiding prior to transfer
- Pre Op Meds
- Side rails up after Pre Op

- Contact lens out
- Dentures / Bridges out
- Nail polish removed
- Vitals within 4 hours of surgery or 30 minutes after Pre Op
- Pre Op labwork on chart
- Abnormal lab values
- Skin prep
- Hx of Aspirin Antidepressant Steroid NSAID's
Steps in the Nursing Process

**A Delicious PIE:**
- Assessment
- Diagnosis
- Planning
- Implementation
- Evaluation

**An Apple PIE:**
- Assessment
- Analysis
- Planning
- Implementation
- Evaluation