

Medication Management in a Child/Adolescent with a Traumatic Brain Injury

By Judith A. Woop

The Standards of School Nursing Practice (American Nurses Association) requires using the nursing process in the school setting. Standard III Nursing Process, states: "The nursing process includes Individualized Healthcare Plans (IHP) which are developed by the school nurse." The IHP provides the format to record each step in the nursing process. It focuses on the specific health needs and problems of a student at a given time in their development and educational career. Much like the individualized education plan (IEP), the IHP outlines the plan of health-related services and programs required to support the student's safe and successful functioning in the school setting.

Development of an IHP provides for effective and efficient delivery of health-related services that promote school success for the student and reduces the liability of the school district.

The following is a sample IHP for a student who has recently sustained a concussion. Concussion

symptoms usually appear immediately, although they can present later, and affect a wide array of mental functions. Memory loss, dizziness, emotional instability, disturbances of equilibrium, vision, and cognitive functions, as well as headache, nausea and vomiting are common symptoms. Concussion results in immediate chemical changes within the nerve cells of the brain, which usually return to normal over several days or weeks. A concussion may have widely varied clinical consequences (from mild to severe); like all injuries, however, it is imperative that the injured body part be afforded adequate time to heal. Resting the brain must not only involve ceasing physical activity for a period of time, but also should include a break from challenging cognitive activity as well. This can be used in addition to any Section 504 plans created for the student returning to school after a concussion and it ensures that the student's medical needs will be addressed in the school setting by a written health care plan.

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CHILDREN & ADOLESCENTS LESSONS

NURSING DIAGNOSIS	GOALS	NURSING INTERVENTIONS	OUTCOMES
Alteration in comfort/pain related to head trauma.	Promote comfort.	Assess VS, pupils and pain scale. Provide medication as per MD. Provide alternate comfort measures such as cold therapy. Encourage rest periods as necessary.	Student will experience an increased level of comfort.
Potential alteration in thought process.	Student will participate in regular academic schedule.	Encourage teachers to monitor changes in academic status.	Student will maintain academic achievement with modification in curriculum assignments and grading as needed.
Activity intolerance related to head trauma.	Student will return to scheduled gym/recess.	Monitor student's activity. Make adjustments in schedule as needed.	Student will participate in school activities without signs of fatigue.
Knowledge deficit related to concussion.	Student, family and school personnel will understand potential side effects of concussion.	Facilitate opportunities to educate student, family and school personnel.	Student will use knowledge of his concussion to self-advocate with peers and staff.
Ineffective coping limitations secondary to concussion.	Student will demonstrate increased use of adaptive strategies for coping.	Provide encouragement and positive reinforcement to student. Encourage verbalization of feelings. Promote constructive outlets for anger/frustration. Communicate with student, family, physician, mental health professionals to promote continuity of care.	Student will use adaptive skills to increase coping and decrease feelings of anger.
Potential for injury.	Student will remain free from injury.	Student will demonstrate safe mobility in school. Modify school environment by removing hazards in classes/hallways Review emergency evacuation plan.	Student will return to school with accommodations as needed. Student will navigate hallways in a safe manner.

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