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Pediatric age

The purview of pediatrics includes the physical and psychosocial growth, development, and health of the individual. This commitment begins prior to birth when conception is apparent and continues throughout infancy, childhood, adolescence, and early adulthood, when the growth and developmental processes are generally completed. The responsibility of pediatrics may therefore begin with the fetus and continue through 21 years of age. There are special circumstances (eg, a chronic illness and/or disability) in which, if mutually agreeable to the pediatrician, the patient, and when appropriate the patient's family, the services of the pediatrician may continue to be the optimal source of Healthcare past the age of 21 years.

Pain assessment in the pediatric population is challenging because of age, developmental stage, and patient cooperation. Cognitive impairment, impaired communication, and physical disability that may accompany traumatic brain injury (TBI) further complicate pain assessments. A pilot descriptive qualitative research study was conducted to investigate nurse perceptions of pain in pediatric patients diagnosed with TBI. Specifically, this study sought to answer the following questions: a) Is pain accurately assessed in this population? b) Is pain adequately treated in this population? and c) What obstacles exist, if any, to the assessment and treatment of pain? A convenience sample of three registered nurses employed in a pediatric neurosurgery setting participated in this study. Each nurse participated in one individual, semi-structured, face-to-face interview lasting approximately 30 minutes. Interviews were transcribed verbatim and analyzed for common themes. Common themes identified across all interviews were a) challenging assessments; b) limited, although effective, treatments; and c) communication as an area of opportunity for improvement. Implications for practice and policy include a need for more sensitive pain assessment tools to improve the objectivity and accuracy of pain assessment, clarification of care priorities and organization of care from clinical and management perspectives, and additional research in alternative pain treatments for this population. Findings from this study will guide the development of a larger, more comprehensive study, with the aim of improving practice and policy in pain management for this population 1.

1)

McCaa R. Nurse Perceptions of Pain in Pediatric Traumatic Brain Injury: A Pilot Study. Pediatr Nurs. 2017 Mar-Apr;43(2):92-5. PubMed PMID: 29394483.

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