

Current practice in nursing care of pediatric patients and therapeutic play in nursing care of pediatric patients.

Malakeh Nieri*

Faculty of Health Sciences and Social Care, Molde University College, Norway.

Abstract

According to the Center for Disease Control (CDC), in 2017 rehabilitated pediatric cases in the United States comprised 6.6 of the total rehabilitated cases across all periods with an aggregate of 529 pediatric cases (3). Those pediatric cases admitted are complex with comorbidities in numerous cases. Presently nurses face increased patient caseloads in the sanitarium, homecare, and clinic settings and accordingly their time is at a premium. The suggestions for interventions in this course will help the nurse to give care that's timely and diminish emotional meltdowns by understanding the child throughout his/her developmental stage. The way a nurse approaches his/her cases can do a great deal in encouraging a alarmed or cautious child. Research has shown children tend to be extremely flexible when well supported (2). Children who have access to defensive factors are more suitable to overcome adversity and traumatic events. These defensive factors are particular rates similar as personality; family connections; managing chaos; passions of control and tone- confidence (4). Through adversity children can learn how to reuse life grounded on their own gestures, how they've dealt with those gestures in the history, and responses from others similar as parents, nurses, and other healthcare providers. In short, children use these events to reflect back in a positive way for unborn stressful gestures.

Keywords: Nursing care, Pediatric Patients.

Introduction

A pediatric nurse deals not only with the child but also with all the anxieties and demands of the parents. In addition a study by Tubbs- Cooley et al. (2019) set up the violent intellectual pressures and time constraints of nurses are factors in the quality of care as important as patient volume and perceptivity. Nurses experience violent stress to complete their vital tasks with cases and this is another factor in their capacities to deliver quality care. Sanitarium directors, nurse directors and nurses themselves must address this position of stress and the time constraints to help grease quality of care. Children are equipped with capacities to describe retired stress and this reflects on how they perceive and reply to a given situation. Children use play to make sense of their world, to classify the collaborative total of their being with their relations, dreams, mistakes, and joyous stations [1]. As nurses, we must grease this play through our contact with our youthful cases. Play is veritably personalized, each child deciding his/her favorite play exertion. Remedial play decreases negativity, provides motor exertion outlet, and helps the child manage. Play provides the child with an active part and control of the situation, and distracts from procedures that beget stress [2].

Here are some examples of therapeutic play

The child using the IV catheter on his/her doll or stuffed beast. Allowing the child to play with the outfit for several days prior to the procedure assists in recycling the procedure successfully. Stories can be read to the child or the child can make up his/her own story about the healthcare event. Dollies are especially useful for children to act out what they're passing in the sanitarium setting. Nurses can also have the dollies ask particular questions of the child, and it's more likely the child will answer them. Suggestive remedy (13) works well with children hourly because they're hands-on learners and express their feelings the same way [3,4].

Conclusion

Adding fluid input can be fulfilled by cutting gelatin into fun shapes; using small drug mugs and decorating them; color water with food coloring; make a bill and give prices when drinking a specified quantum. Deep breathing can be encouraged through blowing bubbles; blowing a pinwheel or a party cracker; suck paper from one vessel to another using a straw. Range of stir conditioning can be dissembled with conditioning similar as throwing bean bags into a handbasket; hang balloons and have the child protest them; play Twister or Simon Says; play kickball with a froth ball; give complexion for fine motor exercises; makeup or draw on large wastes

*Correspondence to: Malakeh Nieri, Faculty of Health Sciences and Social Care, Molde University College, Norway, E-mail: malakehnieri@himolde.no

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of paper on the bottom; play beauty shop and comb or set hair. souses can be imitated by playing with toys in water; washing his/ her dolls; picking up marbles in the bath water. Injections can be dissembled by letting the child play with the hypes with his/ her doll; use hypes to embellish eyefuls with frosting; allow the child to have a collection of different sized hypes to manipulate. Giving the child commodity to push like a stroller or wheelchair, and holding a cortege can encourage ambulation. Children in traction can have their terrain expanded by turning the bed into a corsair boat or aeroplane with decorations; or moving the bed to the playroom.

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