Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CTPN Clinical Observation:

Dr. Grellner: Physician’s Office Day 1

During this rotation you may assist with the following skills under the supervision of the RN, LPN, mid-level practitioner, or physician, e.g. respiratory treatments, venipuncture, collect UA’s perform throat swabs, administer injection, perform FSBS, detect fetal heart tones, and vital signs. At the completion of this observation experience, prepare a written report addressing your experience.

1. List immunization schedule for first 4 years:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| AGE  | Vaccine | Vaccine | Vaccine | Vaccine | Vaccine | Vaccine | Vaccine | Vaccine | Vaccine |
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1. What factors might influence the timing of the immunization schedule?
2. What are most common injection sites used for administering immunizations and why are these sites used?
3. What combination vaccines are available and what risks might be associated with them?
4. Which vaccines contain mercury and which do not? What are major differences with these vaccines?
5. List any medications (including dose) you observed administered. What is recommended dose, common side effects and adverse reactions you might see with this medication?
6. Choose 1 patient and complete a clinical comparison of the patient’s medical diagnosis versus the description of the diagnosis or condition in your textbook

|  |  |  |
| --- | --- | --- |
|  | **Textbook** | **Patient** |
| **Medical Diagnosis:**  |  |  |
| **Diagnostic definition:** |  |  |
| **Signs and symptoms:** |  |  |
| **Prognosis:** |  |  |
| **Ramifications for Patient’s Life:** |  |  |
| **Ramifications for Family’s Life:** |  |  |
| **Ramifications for Emotional/Social:** |  |  |
| **Suggested laboratories:** |  |  |
| **Tests:** |  |  |
| **Treatment:** |  |  |
| **5 Prioritized Potential (text) Actual (patient) Nursing Dx:**  |  |  |

1. Choose the #1 Nursing Diagnosis write a complete diagnostic statement, 3-5 interventions, each with its own scientific rationale, and the evaluation you will use to ensure that the intervention has been met:

|  |  |  |  |
| --- | --- | --- | --- |
| **Nrs Dx** | **Intervention**  | **Scientific Rationale** | **Evaluation Tool**  |
|  | 1. |  |  |
|  | 2.  |  |  |
|  | 3.  |  |  |
|  | 4. |  |  |
|  | 5. |  |  |

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| --- | --- | --- |
| **Grading Area** | **Point Possible** | **Point Received** |
| **Objectives (10 points each)** | **80** |  |
| **Attendance** | **5** |  |
| **Net Score** | **85** |  |
| **Deductions (direction/spelling/grammar) Max 10** |  |  |
| **Final Grade** |  | **/85** |
| **Percentage** |  | **%** |

Clinical Observer’s Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clinical Observer’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_