

Febrile Seizure

Nr.	Nursing Diagnosis	Date	Nursing Intervention/s and tasks	Sign.
	<p>Hyperthermia Related factors: Illness or trauma Exposure to hot environment Exposure to environment with increased temperature Symptoms / Risk factors: Seizures or convulsions Elevated heart rate Warm to touch Increase in body temperature above normal range Outcome / Goal: Temp. normal</p>		<p>Infection Control Monitor vital signs _____ Input and Output of Fluid Measurement Administer medication due as ordered by the physician Monitor effects of medication _____ Monitor lab. studies, as indicated _____ Wash hands before and after all care contacts Fever Treatment Assess whether clothing or bed covers are too warm for the environment/child Administering doctor-prescribed fever reducers Monitor effects of medication _____ Teach the early signs of hyperthermia: Flushed skin, Fatigue and loss of appetite</p>	
	<p>Ineffective breathing pattern Related factors: Neuromuscular impairment Symptoms / Risk factors: Cessation of breathing in status epilepticus Obstruction of airway by secretions during a seizure Dyspnea Tachypnea Outcome / Goal: Maintain adequate ventilation</p>		<p>Airway Management obs. respiratory rate, rytm, depth and effort Position the child to optimize respiration Obs. secretion and remove to prevent aspiration Administer O2 if indicated</p>	
	<p>Risk for injury Related factors: Seizure Tissue hypoxia Physical trauma Symptoms / Risk factors: Change i consciousness Falls Muscle flaccidity or rigidity Aspiration of secretions Cyanosis Outcome / Goal: Be free of injury/complications</p>		<p>Surveillance Stay with child during seizure Lay the child on his or her side to prevent choking Do not put any object into child's mouth - use your fingers only if needed Assist parents to remain calm during seizure activity of child Teach parents about care of the child during seizur and precautions to take Teach about information to record about seizure activity should it occure</p>	
	<p>Imbalanced nutrition: Insufficient Related factors: Hypermetabolic state due to febrile condition Decreased appetit Symptoms / Risk factors: Dehydration Outcome / Goal: Nutritional status to almost normal</p>		<p>Fluid Management Provide fluid po if prescribet Assess skin turgor, mucous membranes, and thirst Explain reasons for therapy and it inteded effects to parents and family members Measure intake and output:weigh _____</p>	
	<p>Compromised family coping Related factors: Situational crisis Symptoms / Risk factors: Fear regarding child's disorder Protective behavior by parents Outcome / Goal: Parents vil cope effectively by date _____ Parents indentify stressors of child's illness</p>		<p>Coping Enhancement Assess current functional capacity (coping, defense mechanisms) Appraise the Parents understandnig of Febrile Seizure Assist family in providing emotional support. Assist the parent's to clarify misconceptions Determine the understanding of disease process and expectations for the futur Encourage parent's / family involvement, as appropriate Provide opportunity for client to discuss how illness has affected relationships</p>	