AMALA COLLEGE OF NURSING
AQAR (2023-2024)

CRITERION 2 – TEACHING- LEARNING AND EVALUATION

Key Indicator 2.3 – Teaching- Learning Process

Metric No. 2.3.5.- The teaching learning process of the institution nurtures creativity, analytical skills and innovation among students

SUBMITTED TO

National Assessment and Accreditation Council

Problem based learning

PROBLEM BASED LEARNING

1) problem

Naster Nathew, 2 year old boy presents with symptoms suggestive of wilms tumour including abdominal mass, nausea, vomiting, urinary trait infection, anorexia, hematuria and malnourishment. Laboratory findings and CT scan confirm the presence of an abdominal mass and urine analysis. indicates the presence of red blood cells, pus cells and cast cells.

2) Existing knowledge

From the previous semester we have come across with wilm's tumour in Pathology. wilm's tumour is the most common renal tumour in the childhood. It is highly malignant primarily embryonal tumour, most commonly seen between 2 and 5 years of age. this childhood kidney cancer is typically present with abdominal mass and related symptoms. Nursing case for pediatric oncology patients involve the holistic approach including pain management, nutritional support, emotional support, preparation for treatment, monitoring, education and follow up.

3) Required knowledge

In depth understanding of wilms tumour its pathophysiology, diagnostic criteria and measures, various treatment modalities available including surgery, chemotherapy, radiation therapy and potential complications and nursing care management.

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

specific to pediatric oncology patients.

4) Research

> Advances in wilms tumour treatment and biology : progress through international collaboration – This is a research done by Jeffrey S Dome in 2015. This article gives an overview of the children's oncology group and international society of pediatric Oncology approaches to wilm's tumour and focus on 4 subgroups (stage iv, initially inoperable, bilateral and relapsed WT) for which International collaboration is pressing.

> Evidence - based surgical guidelines for treating children with wilm's tumour in low resource settings – This research is done by Abdelhafeez in 2022 December. This research provides resource sensitive recommendations for the surgical management of wilm's tumour.

5) Analyze

Analyzing Master mathew's condition, he is presenting with symptoms of nausea, vomiting, urinary tract infection, anorexia & hematuria. The child is malnourished and red colour urine have been passed. The vital signs of child are T - 100°F, Pulse - 100 beat/min, Resp - 28 breath/min. Laboratory findings of the child includes Hb - 13.5 gm%, RBC, pus cells and cast cells present in urine. CT reports reveals abnormal mass on abdomen. we should analyze the potential challenges in providing nursing care to Master mathew and adress them proactively.

6) Reflect and compare

Reflect and compare should be based on past Experience But we have so far no such exposure has been received.

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

7. Solution

Develop a comprehensive nursing care plan tailored to Master Mathew's needs and preferences. Collaborate with the healthcare team to coordinate multidisciplinary care and address all aspects of his condition, including symptom management, nutritional support, pain management, psychosocial support, education, and follow up care.

8. Assess

Continuously assess Master Mathew's response to nursing interventions, treatment modalities and overall care plan. Monitor for any changes in his condition, complications or side effects of treatment. Adjust the care plan as needed based on ongoing assessments and communication with the healthcare team.

Reference

1. Assuma Beevi T.M, Consise textbook of pediatric Nursing

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

- provide information appropriate to their level of understanding.
- Help prevent rupture of the encapsulated tumor by avoiding abdominal palpation and by promoting careful bathing and handling.
- Monitor level bowel sounds and assess for signs and symptoms of obstruction.
- Prevent infection by proper precautions such as avoiding contact with infected persons and following universal precautions.
- Prepare the child for radiation therapy, as and when needed.
- Provide family and patient education, as needed.

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

- Urological anomalies such as hypospadias, and undescended testis.
- Hypertension, pallor, anorexia, lethargy, fever related to infection, dyspnoea & chest pain related to lung metastasis.
- lab findings :- CT shows abnormal abdominal mass.

Nursing Diagnosis

- Anxiety
- High risk for infection.
- Risk for injury
- Altered nutrition
- A/c Pain
- Powerlessness
- Altered family Process
- Altered tissue perfusion.

Nursing Interventions

- Prepare the child for diagnostic tests and treatments according to the level of development and understanding.
- Address the specific tests fears and misconception of the family and include them in planning the care for their child

NURSING MANAGEMENT

GOALS

*) Assessing for the presence of Wilm's tumor
*) Providing emotional support for the patients and child.
*) Preparing the parents and child for diagnostic procedures and treatments
*) Assisting with therapeutic management and
*) Planning for discharge.

ASSESSMENT

→ History collection :-

Collect complete history regarding,

- Genetic influence
- Familial predisposition (siblings & identical twins have higher risk in developing disorder).
- Higher chance in children with aniridia.

→ Physical Examination :-

- Asymptomatic abdominal mass and palpable renal mass of nontender type, deep and confined to the one side, usually left side.
- Hematuria, urinary disturbances, Malaise, weight loss, anemia.

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

AMALA COLLEGE OF NURSING

PROBLEM BASED LEARNING

GROUP NO: V	
Roll No: 27 to 32	**PBL :SCENARIO NO: 1** Master Mathew 2 year old boy admitted in pediatric ward with the complaints of abdominal mass, nausea, vomiting , urinary tract infection, anorexia and hematuria. On observation child is malnourished and passed red coloured urine. His vital signs are temperature 100 degree F, pulse 100/min and respiration 28/min is regular. Child is immunized till the age. There is no significant past medical or surgical history. Laboratory findings of childs is Hb 13.5gm%, urine-RBC and pus cells and cast cells present. CT report reveals abnormal mass on abdomen . **Focus on: Identify the disease condition and write the nursing care management of child .**

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

APPENDICITIS

DIAGNOSIS

Based on the clinical presentation, laboratory findings and imaging studies, the diagnosis for Malu is likely acute appendicitis.

TREATMENT PLAN

Therapeutic Management

- It includes rehydration, antibiotics and surgical removal of the appendix (appendectomy), analgesia.

Preoperative Nursing Care

- NPO status should be maintained to prevent aspiration during surgery.
- Vital signs should be monitored
- Comfort measures should be provided to alleviate pain and anxiety.
- Preoperative teaching should be provided to the child and her family to alleviate fear and enhance understanding of the procedure.

Postoperative Nursing Care :

- Vital signs should be monitored,.
- Assess signs of infection or complications
- Pain management should be optimized

- Encouragement of early ambulation and deep breathing exercises.
- Assessment and management of wound site
- Oral intake should be gradually resumed, starting with clear fluids and advancing as tolerated
- Education should be provided to the child and family

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

AMALA COLLEGE OF NURSING

PROBLEM BASED LEARNING

GROUP NO: VI	
Roll No: 33 to 38	**PBL: SCENARIO NO: 2** A 6-year-old girl, Malu, presented to the emergency room with a 3-hour history of right-side abdominal pain and fever. Her mother reported that the child fell asleep after having dinner. After an hour and a half patient woke up screaming in pain and holding her right side, saying it was hurting. In addition, reported that the child had a fever of 102.6° F 2 days ago, vomited twice, diarrhea, or dysuria. She stated patient also had a mild cough and that her last bowel movement was about 2 days ago. There is no significant past medical history and family history. Her father is an Electrician, Mother House wife, Elder sister studying in 5th standard. Malu is fully immunized. Her vital signs on admission were temperature 102. 8° F, pulse 177, respiratory rate 28/min, blood pressure 100/65 mmHg. Weight:30.2kg, Height: 112cm, SPO2: 98%. The patient was alert and appears to be in moderate distress, holding her right. Curled up in the fetal position. Hemoglobin 10.6 g/dl, total white blood cell count (WBC) 20.300/mm² with 87% polymorphonuclear leukocytes, 6% bands, 2% lymphocytes, 5% monocytes, platelet count 381,000/mm² ESR 60 mmhr. USG Abdomen-Graded compression ultrasound of the right lower quadrant reveals a non-com enlarged appendix. **Focus on: What is the diagnosis? Treatment Plan? Preop and post op nursing care?**

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

PROBLEM BASED LEARNING

Problem

A six year old girl Malu, presented to the emergency room with a 3-hour history of right-side abdominal pain and fever. In addition child had a fever of 102.6°F 2 days ago, vomited twice diarrhea and dysuria. Patient also had a mild cough and her last bowel movement was about 2 days ago. Patient was curled up in a fetal position

Existing Knowledge

From the previous semester we had learned that appendicitis is the inflammation of vermiform appendix and its signs and symptoms include fever, abdominal pain localized in the lower right quadrant, nausea and vomiting. Additionaly knowledge of diagnostic procedure such as physical examination, laboratory tests including increased & WBC count and imaging studies such as USG and CT scan is important for identifying appendicitis

Required Knowledge

Conformation of diagnosis through additional imaging, surgical management options, preoperative preparation, intraoperative considerations, postoperative nursing care, potential complications and

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

long-term prognosis.

Research

Reviewing recent guidelines and studies on the diagnosis and ~~Stud~~ management of pediatric acute appendicitis, including surgical approaches. Reviewing the research of Arredondo Montero J, (Diagnostic performance of serum interleukin-6 in pediatric acute appendicitis); Kevin M Costello (Management of Pediatric Acute Appendicitis in the Era of Laparoscopy).

Analyze

Analyze the available data such as 3 hour ~~d~~ history of right side abdominal pain ~~and~~, fever, diarrhea, dysuria, vomiting and increased WBC count helps ~~as~~ to determine the best diagnostic and treatment strategy for malu.

Reflect and Compare

Reflect and compare the situation on the bases of past experience and new knowledge learned from the journals

Solutions

Developing a comprehensive treatment plan, including diagnosis confirmation, surgical approach selection, preoperative preparation, intraoperative management, postoperative care, and communication with the family.

Surgical removal of the inflamed appendix, known as an appendectomy. This procedure can be perfoemed using traditional open surgery or minimally invasive laparoscopic surgery.

In addition to surgery, other aspects of treatment may include:

1. Pain Management
2. Fluid and Nutrition Support
3. Antibiotic Therapy
4. Monitoring for Complications
5. Follow-Up Care

Assess

Continuously monitoring Malu's progress, adjusting the management plan as needed, and providing ongoing support and education to ensure optimal recovery.

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING
AMALA NAGAR, THRISSUR

AMALA COLLEGE OF NURSING, THRISSUR

Department of Child Health Nursing

III year B.Sc. Nursing

EVALUATION PROFORMA FOR PROBLEM BASED LEARNING

Topic: Scenario.

Class: 3rd Year BSc(N) **Date & Time:** 8/11/2023. **Subject:** Child Health Nursing

Sl. No.	Content	Max. Marks	Marks Obtained
1	**Knowledge building and inquiry skills (7)**		
	• Recognize inadequacy of existing knowledge	1	.5
	• Identifying learning needs	1	1
	• Set specific learning objective	1	1
	• Device appropriate search strategy	1	1
	• Collect evidence and communicate to group members	1	.5
	• Application of evidence to solve problem	1	1
	• Organize scientific principles in solving problem	1	1
2	**Group Skills (9)**		
	• Group goal than personal goal	2	1.5
	• Adequate theme skills	2	1.5
	• Emotional support among the group	2	2
	• Demonstrate enthusiasm	1	.5
	• Monitor group progress	1	1
	• Facilitation group interactions	1	1
3	**Problem solving (8)**		
	• Follow the problem solving strategy	2	1.5
	• Analyze and generate hypotheses	2	1
	• Gather and evaluate information	2	1
	• Reflect on decision making process	2	1
4	**References (1)**		
	• Bibliography	1	1
	Total	**25**	20

Remarks of Evaluator Very good effort (Sheelacy)

(Sheelacy)
Signature of Evaluator

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

AMALA COLLEGE OF NURSING ★ AMALA NAGAR, THRISSUR