

PSYCHOSOCIAL ASSESSMENT OF PATIENT

First name of patient: **Hunter**

Age: **6 y/o**

Parents/Caregivers: **Mom and Dad Present**

Siblings & Ages: **None**

Diagnosis: **Short Stature**

Possible Tests/Procedures During Admission: **Growth Hormone Stimulation Test (Infusion)**

Developmental Level:

Which stage are they in for:

Piaget: **Preoperational Stage**

Erikson: **Industry vs. Inferiority**

Development	Developmentally on track?	How did you assess this?
Cognitive	Yes	Pt was able to remain still through his entire procedure. Pt was able to recall last PIV experience when mom asked about details.
Language	No	Pt couldn't form complex sentences. Pt didn't speak clear sentences. Pt had underdeveloped speech (babbling).
Fine Motor	Not Observed	N/A
Gross Motor	Yes	Pt was able to sit upright in the chair without assistance. Pt was able to move from one side of the chair to the other when asked to do so.
Social	Yes	Pt was emotionally aware – "Ow that's tight on my arm". Pt had conflict resolution skills – Pt: "can you do it quickly?" CCLS: "If you hold still this will be over really soon" Pt: "Ok."

Patient's understanding of Hospitalization:

Assessment of Patient Coping (choose the most appropriate one and cite theory as evidence as to why):

- **Developmentally appropriate coping:** Hunter showed developmentally appropriate coping because he was able to recall and discuss details about his past IV experience. In Piaget's preoperational stage, his developmental age allows him to think concretely and use his past experience to understand what was going on.
- Not developmentally appropriate coping:
- Would likely benefit from ongoing child life support:

According to Coping Theory, choose the most appropriate and how did you make this assessment?

- **"avoidant" or information limiting:** According to Coping Theory, some children cope by receiving little to no information about their procedure. Hunter was information-limited, as he was not interested in details of the procedure and only asked questions about the length it would take to complete the procedure.
- **"vigilant" or information seeking:**

List 2 -3 potential interventions to plan, cite reasons which include the assessment made above, developmental theory, child life theory, coping theory, and EBP:

1. According to my assessment, the child was very happy and energetic upon entering the room. CCLS could utilize technology as a distraction intervention to focus the child's gaze away from the procedure, as he is information-limited.
2. Knowing that Hunter is in Piaget's preoperational phase, using simple explanations and using positive reinforcement for "holding still".
3. Since I had assessed that his mom was very involved and was confident in her ability to help the patient, it would be appropriate to give Hunter autonomy and choice if he wants to get the poke in his mom's lap (using comfort positioning) or to sit by himself.

