

# Scenario C-3



CREDIT HOURS  
SCAN & FLIP CARD  
FOR DIRECTIONS  
—OR—  
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WATCH  
QUICK TIP VIDEO

2-year-old who is sleepy, breathing fast, and "has been peeing like a race horse." He's pink, warm, and dry with rapid and deep respirations.

## Back to Basics

*Reminder:* Peds tapes, cheat sheets, and apps have most, but may not have all of the answers, so be prepared!

- A What color zone does this *Mani-Kid* fall into?
- B What is the child's weight?
- C How old is this simulated patient?
- D What is the normal heart rate, respiratory rate, & systolic blood pressure?
- E If you need an alternate airway, what size would you use? (King Airway, LMA, -OR- i-gel)

## If this patient crashes...

## Advanced

- F What size oral endotracheal tube (ETT)? Where do you secure it at the teeth/gumline?
- G What size ETT suction catheter?
- H What is the dose (0.01 mg/kg) of IV or IO EPINEPHrine in mg and mL?  
\* 1 mg/10 mL concentration \*
- I What is the "high" limit on your bedside blood sugar machine?
- J Normal saline (NS) or Lactated Ringer's (LR) bolus (20 mL/kg) in mL?

## Expert

- K Nasogastric or orogastric tube size?
- L Foley urinary catheter size?
- M Over what period of time should the glucose be corrected?
- N In addition to blood sugar, what key electrolyte beginning with the letter "P" should be regularly checked?

## PEDS PEARLS QUICK TIPS

- \* Pink, warm, and way too sweet
- \* Always check a rapid blood sugar with any "sick" kid
- \* Cautious rehydration and NO Bicarb
- \* DKA kicked in slowly (>24 hours), so fix it slowly (>24 hours)



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