

# Children's functional health pattern assessment essay examples

[Experience](#), [Belief](#)



- Compare and contrast identified similarities as well as differences in expected assessment across the childhood age groups.

The major differences occur in the nature of patterns to be assessed. In children who are school-going, all patterns have relevance and may be assessed. Thus, for older children, the comprehensiveness intended by assessment using Gordon's functional patterns may be achieved much easily. However, for children who are younger- the preschool there are certain patterns which do not have relevance because the children have not established functioning in those patterns. Such patterns, which require insight, include value belief pattern and health belief – health perception. The infant does not possess judgment and depends on the discretion of their carers over certain issues. This therefore limits assessment of such patterns in infants and very young children (Gordon, 1994).

Similarities include the fact that in all three cases, parents are needed to be available in order to provide comprehensive information concerning the children. Children always feel comfortable when a family member is around when they are in contact with a stranger. This helps to draw calm in them and helps to have them co-operate with the clinician.

- Summarize how a nurse would handle physical assessments, examinations, education, and communication differently with children versus adults.

Consider spirituality and cultural differences in your answer.

When assessing the pediatric patient, the environment should be customized to meet the expectations of the child. The child should be allowed to play games as a diversional therapy. Then during the assessment, ensure that the least intrusive regions are assessed first. Generally approach to a

pediatric patient requires much more sensitivity, and this should begin from the environment, the methodology for assessment in which the procedure should be carefully arranged to avoid irritation of children before completing the assessment

In addition to the above factors, childhood assessment entails finding out the status of growth and development. It is imperative to ask oneself whether the weight and height of the child are appropriate for their age. Additionally, the developmental milestones that are normal at particular at particular ages should be assessed. The clinician should find out the age in which the child achieved basic targets like walking and talking. This will give a picture of the pattern of the child's development.

The activity level of the child should also be included, for example whether the child is generally active or busy, whether they tire easily, or whether they experience shortness of breath when performing physical activities. For the adult, assessment and physical examination should be systematic. The order of physical examination should be from head to toe. The only caution is that more or less private areas should be examined, if need be, after all other systems have been assessed. Assessment of adult individuals is much easier as adults tend to verbalise their complaints and they are much more compliant (Edelman, 2006).

## References

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