



GOAL	INTERVENTION	RATIONALE	EXPECTED OUTCOME
<b>1. Risk for Infection related to immunosuppression, chemotherapy, and presence of invasive lines</b>			
	NIC Priority Intervention: <b>Infection Protection:</b> Prevention and early detection of infection in child at risk.		NOC Suggested Outcome: <b>Risk Control:</b> Actions to eliminate or reduce health risks.
The child will remain infection free.	<ul style="list-style-type: none"> <li>■ Educate the child and parents about meaning of blood counts.</li> <li>■ Encourage parents/family members to use masks when they are ill.</li> <li>■ Encourage good handwashing at all times.</li> <li>■ Advise the child's teacher to tell parents if the child is exposed to communicable illness at school.</li> <li>■ Clean vascular access site and inject heparin per protocol. Observe for signs of infection. Report infection to physician.</li> </ul>	<ul style="list-style-type: none"> <li>■ Knowledgeable parents and child can protect themselves.</li> <li>■ Masks help decrease airborne infection if used properly.</li> <li>■ Handwashing is best prevention.</li> <li>■ Exposure can be reported to physician for possible use of acyclovir or admission for treatment.</li> <li>■ Use of heparin maintains an open access route by preventing clotting.</li> </ul>	The child remains infection free.  All exposures are reported to physician immediately.
<b>2. Altered Nutrition: Less Than Body Requirements related to inability to ingest or digest adequate quantities of food or absorb adequate nutrients</b>			
	NIC Priority Intervention: <b>Nutrition Management:</b> Assistance with and provision of a balanced dietary intake.		NOC Suggested Outcome: <b>Nutritional Status:</b> Extent to which nutrients are available to meet metabolic needs.
The child will maintain adequate nutritional intake.	<ul style="list-style-type: none"> <li>■ Encourage small and frequent high-calorie meals. Encourage small bites of a variety foods</li> <li>■ Promote good oral hygiene and use of nonalcohol mouthwashes.</li> <li>■ Teach home parenteral nutrition if ordered.</li> </ul>	<ul style="list-style-type: none"> <li>■ Measures to increase caloric intake. Taste changes and favorite foods may no longer be preferred.</li> <li>■ Mouth sores interrupt eating. Alcohol stings open sores.</li> <li>■ Parenteral nutritional support may be used to enhance intake.</li> </ul>	The child maintains normal weight for height.
<b>3. Ineffective Management of Therapeutic Regimen related to complex therapy.</b>			
	NIC Intervention: <b>Family Involvement:</b> Facilitating family participation in the emotional and physical care of the child.		NOC Suggested Outcome: <b>Care Management:</b> Family ability to manage complex therapy.
The child will comply with oral medication regimen.	<ul style="list-style-type: none"> <li>■ Educate parents and child about the importance of taking medication as prescribed.</li> <li>■ Set up calendar with dates, times, and medications clearly labeled.</li> <li>■ Reward the child for taking medications.</li> </ul>	<ul style="list-style-type: none"> <li>■ Understanding can assist parents and child in placing importance on medication intake.</li> <li>■ Visual reminders can help them recall instructions.</li> <li>■ Reinforcing desired behaviors, through rewards is effective with children.</li> </ul>	The child takes all medications according to prescription.

(continued)



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<b>4. Altered Growth and Development related to serious illness.</b>			
	NIC Priority Intervention: <b>Developmental Enhancement:</b> Facilitating parents/caregivers to promote optimal growth and development of child.		NOC Suggested Outcome: <b>Child Growth and Development:</b> Normal increase in body size and developmental skills.
The child will demonstrate normal physical, emotional, and cognitive development.	<ul style="list-style-type: none"> <li>■ Encourage play appropriate to age.</li> <li>■ Encourage the child to attend school.</li> <li>■ Encourage seeing peers when unable to attend school.</li> <li>■ Work with teachers to support reentry to school. Use puppets, videotape, and discussion with classmates.</li> </ul>	<ul style="list-style-type: none"> <li>■ Normal activities support self-esteem and self-knowledge.</li> <li>■ School is the work of the child and promotes cognitive and social growth.</li> <li>■ Peer contacts help the child in normal developmental tasks.</li> <li>■ Classmates need to understand what has happened to their friend without asking the child directly.</li> </ul>	The child continues to develop physically, emotionally, and cognitively at a normal pace.
<b>5. Fatigue related to disease state</b>			
	NIC Priority Intervention: <b>Energy Management:</b> Regulating energy use to prevent fatigue and optimize function.		NOC suggested Outcome: <b>Energy Conservation:</b> Extent of management of energy to initiate and sustain activity.
The child will maintain energy levels necessary for normal activities.	<ul style="list-style-type: none"> <li>■ Problem solve ways to save energy for play and school.</li> <li>■ Plan with child for quiet activities during low-energy times.</li> </ul>	<ul style="list-style-type: none"> <li>■ The child and parents are assisted to see school and play as important.</li> <li>■ Child is empowered to select and plan own activities.</li> </ul>	The child plans use of time effectively to maintain energy for school and play. The child conserves energy during times of increased fatigue.
<b>6. Altered Family Processes related to situational crisis</b>			
	NIC Priority Intervention: <b>Family Process Maintenance:</b> Minimization of family process disruption events.		NOC Suggested Outcome: <b>Family Process:</b> Extent of maintenance of family support system.
The child and family will demonstrate healthy adaptation.	<ul style="list-style-type: none"> <li>■ Encourage open communication.</li> <li>■ Suggest that all family members develop support networks.</li> <li>■ Parents should be proactive with siblings about their feelings and needs.</li> <li>■ Encourage attendance of all family members at oncology camps.</li> </ul>	<ul style="list-style-type: none"> <li>■ Open discussion allows problem solving and ego support.</li> <li>■ Networks expand support systems.</li> <li>■ Siblings feel valued and problems are confronted early.</li> <li>■ Oncology camps promote open discussion between peers for further support and fun.</li> </ul>	Parents report better communication between themselves and the children. Family members report an increase in friends with whom they can share feelings. Family reports attending oncology camp and describes benefit of sharing with other families in same situation.