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References for the Acute Care Self Assessment Module in Respiratory Care and Ventilation

A note on resources:

- Elsevier texts are available to you at a 10% discount with no shipping fees. Visit www.pncb.org and log in to access the Elsevier discount portal.
- Check your hospital library for availability of the resources listed. Most will offer interlibrary loan service if a text or journal is unavailable in their collection.
- If you are a member of the American Association of Critical-Care Nurses (AACN), you have access to CINAHL, a literature database, available at their website: www.aacn.org.

Respiratory Acute Care SAE: Reference List

Textbooks:

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Hay, WW, Levin, MJ, Sondheimer, JM & Deterding, RR. (2007) Current Pediatric Diagnosis and Treatment, 18th ed. McGraw-Hill

Slonim, AD & Pollack, MM. (2006) Pediatric Critical Care Medicine. Lippincott, Williams and Wilkins, Philadelphia

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Perkin, RM, Swift, JD, Newton, DA & Anas, MD. (2007) Pediatric Hospital Medicine: Textbook of Inpatient Management Lippincott, Williams and Wilkins, Philadelphia

Nichols, DG (ed) (2007) Rogers Textbook of Pediatric Intensive Care Lippincott, Williams and Wilkins

Bradley P. and Zimmerman J, eds. (2006) Pediatric Critical Care. 3rd ed. Mosby Inc., Philadelphia

Robertson J & Sailkofski. (Eds.). (2008). The Harriet Lane Handbook A manual for Pediatric House Officers 18th edition Mosby Elsevier Philadelphia PA

J. McMillan, R. Feigin, C. DeAngelis, & M. Jones (Ed), (2006) Oski's Pediatric Principle and Practice. Lippincott Williams & Wilkins, Philadelphia

Young, N.S., Gerson, S.L., & High, K.A. (2006) Clinical Hematology. Mosby Elsevier, Philadelphia

2006 Red Book

Content Areas:

Invasive and Noninvasive Ventilation

Objectives:

1. Describe two different modes of invasive ventilation, including volume/pressure, and oscillatory.
2. Identify the mode of action of two types of noninvasive, positive pressure ventilation, CPAP and BIPAP.
3. Based on disease process, determine appropriate ventilation strategies and settings.
4. Evaluate blood gas results to determine ventilator setting changes.

Randolph, AG. Management of acute lung injury and acute respiratory distress syndrome in children. *Critical Care Medicine*. 2009; 37(8) 2448-54.

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Yanez, LJ, Yunge, M, Emilfork, M, Lapadula, M, Alcantara, A, Fernandez, C. A prospective, randomized, controlled trial of noninvasive ventilation in pediatric acute respiratory failure. *Pediatric Critical Care Medicine*. 9(5): 2008; 484-490.

Burns S. Ventilating Patients with Acute Severe Asthma. *AACN Advanced Critical Care*. 2006; (17)2: pp 186-193.

Van Kaam AH. & Rimensberger PC. Lung-protective ventilation strategies in neonatology: What do we know –What do we need to know? *Pediatric Critical Care*, 35(3); 2007; 925-931.

Barrington KJ & Fioner NN (2006). Inhaled nitric oxide for respiratory failure in preterm infants. *Cochrane Database System Review*.

Stockman, LJ, Massoudi, MS, Helfand, R, Erdman, D, Siwek, AM, Anderson, LJ. Severe acute respiratory syndrome in children. *Pediatric Infectious Disease Journal*. 26(1): 2007; 68-74.

Respiratory Infectious Disease

Objectives:

1. Identify symptoms and radiological findings in children with pneumonia caused by bacterial, viral and fungal origins.
2. Describe characteristics of aspergillomas vs pulmonary aspergillosis.
3. Determine evidenced based care for a child with a parapneumonic effusion.
4. List signs and symptoms of pertussis and bronchiolitis.
5. Identify laboratory and imaging studies for respiratory infectious processes including pertussis, bronchiolitis and aspergillosis.
6. Identify signs and symptoms of upper respiratory infectious processes of viral croup and tracheitis.

Graf, J & Stein, F. Tracheitis in pediatric patients *Seminars in Pediatric Infectious Diseases*. 17(1); 2006: 11-13

Epau R., Aubertin G., Larroquet M et al. Conservative use of chest tube insertion in children with pleural effusion. *Pediatr Surg Int*, 22:2006;357-362.

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Sorce, L. (2009). Respiratory Syncytial Virus: From primary care to critical care. *Journal of Pediatric Health Care*, 23, 101-108.

Keyvan, R. & Lichenstein, R. Airway infectious disease emergencies. *Pediatric Clinics of North America*. 53; 2006: 215-242.

Namachivayam, P, Shimizu, K, Butt, W. Pertussis: Severe clinical presentation in pediatric intensive care and its relation to outcome. *Pediatric Critical Care Medicine*. 8(3); 2007: 207 – 210.

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Altunaiji S., Kukuruzovic R., Curtis n., Massie J (2007). Antibiotics for whooping cough (pertussis). *Cochrane Database Syst Rev*. 18(3), CD004404.

AAP statement of the prevention of pertussis among adolescents: Recommendations for use of tetanus toxoid, reduced diphtheria toxoid and acellular pertussis (Tdap) vaccine. *Pediatrics*, 117(3); 2006: 956-78.

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Bruno C., Minniti S., Vassanelli A., & Pozzi-Mucelli R. Comparison of CT features of aspergillus and bacterial pneumonia in severely neutropenic patients. *J Thorac Imaging*, 22:2007: 160-165.

Zmeili, OS, Soubani, AO. Pulmonary aspergillosis: a clinical update. *QJM*. 2007 Jun;100(6):317-34.

Treggiari MM., Rosenfeld M., Retsch-BogartG. (2007). Approach to eradication of initial pseudomonas aeruginosa infection in children with cystic fibrosis. *Pediatric Pulmonary*, 42:751-56.

Reactive Airway Disease/Asthma

Objectives:

1. Discuss environmental triggers and other associated problems in children with asthma.
2. Describe the pathophysiology of asthma and related signs and symptoms.
3. Identify characteristic findings of asthma on xray and expected pulmonary function testing findings.
4. Compare recommended asthma treatments modes of action in relation to lung function.

Anderson, ME & Bogdan, GM. Environment, indoor air quality and children. *Pediatric Clinics of North America*. 54; 2007: 295-307.

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Burns S. Ventilating Patients with Acute Severe Asthma. *AACN Advanced Critical Care*. 2006; (17)2: pp 186-193.

Respiratory Trauma/Inhalation injury/Near Drowning

Objectives:

1. Describe mechanism of injury and potential complications in a child who suffers blunt chest trauma.
2. Identify appropriate radiological studies for a child who experiences chest trauma.
3. List signs and symptoms of airway foreign body aspiration and recommended treatment and support.
4. Discuss findings of smoke inhalation injury and best treatment modalities
5. Describe pathophysiology resulting from near drowning or water submersion.

Duffy, B.J., McLaughlin, P.M. Eichelberger, M R. Assessment, Triage and Early Management of Burns in Children. *Clinical Pediatric Emergency Medicine*. 2006.7; 82-93.

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Structural / Congenital Problems

Objectives:

1. Describe potential structural airway abnormalities in children including tracheal stenosis, vascular ring, Pierre robin syndrome and tracheo-esophageal fistula.
2. Identify assessment findings in a child suspected to have a pneumothorax.
3. Identify diagnostic findings of chronic aspiration.
4. Discuss diagnosis and clinical findings in children with bronchopulmonary dysplasia.
5. Identify respiratory findings and common complications in children with cystic fibrosis.

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Miscellaneous

Objectives:

1. Describe the mechanism pulse oximetry utilizes to measure oxygenation.
2. List management options for a neonate with pulmonary hypertension.
3. Identify pulmonary consequences for a child with a hydrocarbon ingestion.
4. Compare language and speech issues for children with tracheostomies and following decannulation.
5. List laboratory findings of lung fluid of a child with a pleural malignancy.
6. Discuss assessment and treatment of a child with sickle cell disease and acute chest syndrome.
7. Identify the risks associated with radiography in children.
8. Describe assessment and diagnosis of a child with an airway foreign body.
9. Describe the relationship between scoliosis and lung function.

Rothstein, R., Paris, Y, Quizon, A. Pulmonary hypertension. *Pediatrics in Review*. 2009: 30(2); 39 – 45.

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