

DEPARTMENT OF THE ARMY  
HEADQUARTERS, WALTER REED ARMY MEDICAL CENTER  
6900 Georgia Avenue, NW  
Washington, DC 20307-5001

Nursing Policy

23 July 2005

**Scope of Patient Care and Service**

- 1. UNIT TITLE:** Pediatric Ambulatory Clinic
- 2. DESCRIPTION:** The Pediatric Ambulatory clinic provides comprehensive medical care to include Well Baby and health maintenance exams, acute and chronic care, and specialty care. The clinic serves an average of 100 patients a day.
- 3. PATIENT POPULATION SERVED:** Care is provided for eligible dependent children from neonatal to young adults designated by the Defense Eligibility and Enrollment Reporting System (DEERS) and the Outpatient Administration Departments. Care is also provided for the following 14 subspecialty clinics.
  - a) Asthma Center
  - b) Pulmonary
  - c) Cardiology
  - d) Well baby
  - e) Infectious Disease
  - f) Nutrition
  - g) Scoliosis
  - h) Development
  - i) Endocrinology
  - j) Gastroenterology
  - k) Genetics
  - l) Cystic Fibrosis
  - m) Rheumatology
  - n) Dermatology
- 4. CONDITIONS AND DIAGNOSES TREATED:** In addition to caring for the general pediatric population with physicals, same day sick appointments and well baby, the following diseases are also treated but are not limited to: Failure to Thrive, Acute Cardiac Disease, Heart Murmurs, Congenital Heart Disease, Asthma, Diabetes, Biliary Atresia, GI Bleeds, Maple Syrup Disease, Gastroesophageal Reflux, Child Abuse/Neglect, Cystic Fibrosis and Inflammatory Bowel Disease.

a) **High Volume:**

- 1) Sick child (same day)
- 2) Well baby/Well child
- 3) Cardiology diseases
- 4) Endocrinology diseases
- 5) Gastroenterology diseases
- 6) Pulmonary diseases

b) **High Risk:**

- 1) HIV
- 2) Asthma
- 3) Diabetics
- 4) Premature infant/high risk follow-up
- 5) Child Abuse/ neglect
- 6) Post –op Congenital heart disease
- 7) Inflammatory bowel disease
- 8) Cystic Fibrosis
- 9) Failure to thrive
- 10) Fever of unknown origin

c) **Problem Prone:**

- 1) HIV
- 2) Asthma
- 3) Diabetics
- 4) Premature infant/high risk follow-up
- 5) Child Abuse/ neglect
- 6) Post –op Congenital heart disease
- 7) Inflammatory bowel disease
- 8) Cystic Fibrosis
- 9) Failure to thrive
- 10) Fever of unknown origin
- 11) GI Bleed
- 12) Maple Syrup Disease

d) **High Cost:**

- 1) Cystic Fibrosis
- 2) Inflammatory bowel disease
- 3) Cardiac transplant
- 4) Premature infant/ High risk
- 5) Liver transplant
- 6) Growth hormone

**e) Excluded Patient Services:**

- 1) Allergy/Immunology
- 2) Psychiatry
- 3) Social Work
- 4) Dermatology
- 5) Physical Medicine

**5. STANDARDS OR GUIDELINES FOR PRACTICE:**

- a. AR 570-4, Manpower Management, 15 May 2000.
- b. FM 8-501, The Workload Management System for Nursing, Nov 1990.
- c. WRAMC Regulations
- d. WRAMC Nursing Polices
- e. Unit level standard operating procedures
- f. American Nurses Association, Scope and Standards of Practice, 2004.
- g. Behrman, Kliegman, Jenson. Nelson Textbook of Pediatrics, 16th Edition, 2000.
- h. Barone, The Harriet Lane Handbook, 14<sup>th</sup> ed. Mosby, 1996
- i. Hockenberry, M. J., Wilson, D., Winkelstein, M. L., & Kline, N. E., Wong's Nursing Care of Infants and Children, 7<sup>th</sup> Ed., Elsevier, 2003.
- j. McCance, K. L., & Huether, S. E. Pathophysiology: Biological Basis for Disease in Adults and Children, 4<sup>th</sup> Ed., Elsevier, 2002.
- k. Nursing Care of Infants and Children, 7<sup>th</sup> Ed., Elsevier, 2003.
- l. American Academy of Pediatrics Redbook, 25<sup>th</sup> ed. 2000

**6. TREATMENT AND ACTIVITIES PERFORMED:** Registered Nurses are primarily responsible and accountable for all nursing care in the clinic. The Licensed Practical Nurse carry out activities within their scope under the direction of the Registered Nurse. These procedures include but are not limited to: administering immunizations, placing IV's, phlebotomy nebulizer treatments, blood glucose monitoring, wound care, urinary catheterizations, monitoring and assessing the ill child in the treatment room. The Registered Nurse provides education to both parents and staff, manages performance improvement projects, monitors growth stimulation test and oversees all IV therapies. In addition, all paraprofessional staff reports directly to the RN.

**1. PERSONNEL PROVIDING CARE:**

- a) Nursing
  - 1) Registered Nurses
  - 2) Licensed practical nurses
  - 3) Nursing assistants/91Whiskeys
  - 4) Medical Records Technicians
  - 5) Administrators
- b) Other Personnel

- 1) Nurse Practitioners
  - 2) Occupational therapist
  - 3) Echocardiogram technician
  - 4) Physical therapist
  - 5) Dietitian
  - 6) Physicians
  - 7) Certified Diabetic Educator
  - 8) Social Workers
  - 9) Pharmacists
  - 10) Pediatric Case Management team
  - 11) EFMP Staff
  - 12) Respiratory Therapist
- c) Staffing Management: Staffing is also adjusted based on patient need, staff expertise and experience. When additional staff is required to respond to increased patient care demands, augmentation is accomplished by detailing individuals from one area to another within the Pediatric Product Line.

<b>Pediatric Clinic</b>	<b>ASAM Authorization TDA</b>	<b>ASAM Unauthorization TDA</b>	<b>Additional Support Staff</b>	<b>Weekday Staffing (Excluding Head Nurse)</b>
Staffing	Civilian/Military	Civilian/ Military	Contract	Staffing Day Shift
RN	2	0	0	1
LPN	1	0	2	3
NA	1	0	1	2
91W	1	1	0	2

**8. HOURS OF SERVICE:** 0730 to 1630 Monday thru Friday

**9. LOCATION:** Section 1K, North East Quadrant, Building 2, WRAMC