



Learning objectives

This list identifies the goals for the **minimum skills and knowledge** required to perform the care appropriate to your child. You and the healthcare team may use it as a guide and checklist for learning.

Instructions: When the learning is satisfactory to the nurse and to the parent, both will write their initials in the table and put their name and signature at the end where indicated.

The family/caregiver (and child, if appropriate) know:	Date	Initials Nurse	Initials Parent
characteristics of the child's tracheostomy			
advice on the activities of daily living (clothing, nutrition, hydration, bathing, sleep, activities and transportation, communication)			
ways to evaluate the child's respiratory condition and the signs of respiratory distress			
ways to maintain humidity at an adequate level			
general strategies to avoid irritants in the air and to prevent infection			
potential problems and recommended solutions			
CPR and procedures in case of an emergency			
equipment and medical supplies required for daily and emergency care			
reasons for consulting the healthcare team			
all the steps involved in tracheostomy care (tracheostomy skin care, changing the dressing and the inner cannula, if present)			
all steps involved in changing of tracheostomy ties			
all steps included in the changing of a simple tracheal cannula			
indications for administration of aerosolized medication via tracheostomy, if pertinent			
all steps included in the administration of medication by small volume nebuliser via tracheostomy, if pertinent			
all steps included in the administration of medication by metered dose inhaler with spacer via tracheostomy, if pertinent			
maintenance and cleaning of all material used for care/treatments			
Comments:			

The family/caregiver (and child, if appropriate) <u>safely</u> and <u>competently</u> master:	Date	Initials Nurse	Initials Parent
assessment of the child's respiratory condition			
actions to be taken in the event of respiratory distress			
CPR and procedures in case of emergency			
all the steps involved in tracheostomy care (tracheostomy skin care, changing the dressing and the inner cannula, if present)			
all steps involved in changing of tracheostomy ties			
all steps included in the changing of a simple tracheal cannula			
all steps included in the administration of medication by small volume nebuliser via tracheostomy, if pertinent			
all steps included in the administration of medication by metered dose inhaler with spacer via tracheostomy, if pertinent			
maintenance and cleaning of all material used for care/treatments			
Comments:			



The family/caregiver (and child, if appropriate) take into consideration:	Date	Initials Nurse	Initials Parent
the preparation of the child, the parent and the environment before beginning the care			
the pediatric approach for the required care			
the degree of the child's autonomy in participating in the treatment			
the need to readjust the treatment as necessary			
the support necessary to the child before, during and after the treatment			
Comments:			

The family/caregiver (and child, if appropriate) have received and understand the following information:	Date	Initials Nurse	Initials Parent
the medical supplies and equipment distributors contact information			
resources available to them			
the date and place for the next appointment if required			
access information for resource people, as needed			
the number to call in case of emergency			
Comments:			

Name of the nurse:	Signature:	Initials:
Name of the nurse:	Signature:	Initials:
Name of the nurse:	Signature:	Initials:
Name of the nurse:	Signature:	Initials:

Name of the parent:	Signature:	Initials:
Name of the parent:	Signature:	Initials: