

Pediatric Nurse Practitioners, Family History & Children's Health

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Pediatric Nurse Practitioners

- Advanced education in pediatric nursing and health care
- Practice settings:
 - Primary care
 - Specialty care
 - Acute care
- Healthy and ill children of all ages



Pediatric Nurse Practitioners

- Work closely with pediatricians and other health care providers
- Hold national certification
- Enhancing the health care of children for over forty years



Pediatric Nurse Practitioners Services

- Provide health maintenance care, including well child examinations
- Perform routine developmental screenings
- Diagnose & treat common childhood illnesses
- Perform school physical examinations



Pediatric Nurse Practitioners Services

- Provide childhood immunizations
- Provide anticipatory guidance regarding common child health concerns
- Make referrals
- Focus on health promotion, disease prevention



Nurse Practitioner Competencies

- Assess health risk using family history
- Nurse Practitioner Primary Care
 Competencies in Specialty Areas: Adult,
 Family, Gerontological, Pediatric and
 Women's Health, US Dept. of HHS, HRSA,
 Bureau of Health Professions, Division of
 Nursing, 2002
- http://www.nurse.org/acnp/clinprac/np.comp.spec.areas.pdf



Identifying Birth Defects Early

- Children in Primary Care
 - Asymptomatic
 - Symptomatic
 - Parents' concerns about development, learning, behavior, and physical health
- Collect and update history (including family) on asymptomatic and symptomatic children at least once a year
- Make referrals for diagnosis, treatment
 & care to reduce disability



Identifying Birth Defects Early: Family History in Context

- History risk factors
 - Personal
 - Prenatal, birth, neonatal
 - Past medical
 - Family History 3 generation pedigree
 - Developmental
 - Environmental
- Physical examination
- Laboratory testing



Screening for Birth Defects - Genetics

- Has anyone in the family had a birth defect?
- Is there anyone in the family with a stillborn baby or baby who died in early life?
- Is there any chance that you and your child's father are blood related?
- Are there any diseases or traits that run in your family?
- Have you or any of your parents or siblings had three or more miscarriages?
- How would you describe your ethnic background? The child's father?
- Is there anything else you want to share with me?



Complex Common Conditions: PNP Prevention Priorities

- National Association of Pediatric Nurse Practitioners (NAPNAP) Initiatives:
 - HEAT (Healthy Eating and Activity Together)
 - KySS (Keep Your Children/Yourself Safe & Secure)



HEAT (Healthy Eating and Activity Together)

- Prevention overweight & obesity
- Important implications for physical and emotional health of children and adolescents
- Evidence based guidance -nutrition and physical activity to establish healthy behaviors for all children at every age



Prevention of Overweight & Obesity

- 30% of children in the US
- More than 2/3 of children older than 10 years who are obese will become obese as adults
- Family history can target higher risk families
 - Consequences (e.g.), type 2 diabetes, cardiovascular disease
 - Overweight/Obesity
 - "Are any members of your family overweight?"



Prevention of Overweight & Obesity

- Provide overweight prevention as part of every routine visit
- Guide families with moderate or average risk
- Anticipatory Guidance:
 - Encouraging breastfeeding
 - Promoting healthy eating habits
 - Encouraging physical activities
 - Limiting television viewing
- Sensitive topic: many times a parent or both parents are overweight or obese



KySS (Keep Your Children/Yourself Safe & Secure)

- 20-25% of US children & teens affected by mental health & psychosocial issues
- To promote mental health of children & teens through integration of:
 - Effective prevention
 - Appropriate screening
 - Early evidence-based educationalbehavioral interventions to build selfesteem and other developmental assets (e.g., coping, problem-solving)



Prevention of Mental Health Issues

- Family History
 - "Does anyone in your family have learning or emotional problems? Please tell me more."
 - Helps to explore what families are thinking about or reveal areas of mental health concerns related to their children/teens
 - Monitor for symptoms: irritability, mood, behavioral, learning, developmental changes
 - Sensitive topics: stigma, guilt, worry
 - Parenting Issues



Family History Example

- Male adopted at 1 year of age (US)
- Loving foster family
- Biological motherschizophrenia
- No information about father
- Loving adoptive family
- Internet savvy

- Anticipatory guidance
- Monitored for prodromal symptoms
- Age 5 developed acute lymphocytic leukemia (ALL)
- Subsequent learning problems probably related to chemotherapy



Communicating With Families: Sharing Family History

- Understanding the parent and child's view of the condition and risk to others
- Asking what they know is more respectful than simply giving advice and information
- "What do you think of the information I just shared with you?"



Family History & PNP Practice

- Nurses have been educated to look at the child within the context of family
- Natural extension for PNPs to extend questioning into the genetic and family context
- Family history is a significant part of inclusion/exclusion criteria when prioritizing the differential diagnosis and for prevention
- Helps frame discussions with families for possible referral, monitoring for symptoms or interventions with families



Genetics and Genomics in Nursing

- 2.5 million practicing nurses
- Regardless of academic preparation, role or practice setting, nurses are well equipped to collect histories with families
- Essential Nursing Competencies and Curricula Guidelines for Genetics and Genomics, September 2005
 - http://www.ana.org/ethics/

