

REGISTERED NURSE ASSESSMENT FOR VALIDATING CLINICAL HISTORY OF VARICELLA

Directions: As deemed appropriate, Registered Nurse asks parent/guardian enough open-ended questions to elicit adequate history for nursing diagnosis of disease

SAMPLE ELICITING QUESTIONS	DISEASE INFORMATION
1. How was child diagnosed?	<ul style="list-style-type: none"> – Physician diagnosis – seen in office/clinic – Physician diagnosis per telephone – Parent decision (based on past experience with other siblings, etc.) Note: Even if diagnosed, M.D. must validate clinical history of disease.
2. How old was your child?	<ul style="list-style-type: none"> – Passive immunity may exist for 6-9 months in the newborn if the mother has had chicken pox. – Also, young infants have skin lesions easily misdiagnosed
3. Are there any scars present?	<ul style="list-style-type: none"> – If present, parents or older students are usually able to show you. Or they may not have scars.
4. How long was the child ill?	<ul style="list-style-type: none"> – Typically 7-10 up to 14 days. A “light” case has no bearing on immunity.
5. Parent description of lesions (rash):	<ul style="list-style-type: none"> – Initially – dew drop/pimple like, ruptures easily. Each vesicle is usually surrounded by redness.
A. What did initial lesions look like?	
B. Any more after the first day?	<ul style="list-style-type: none"> – Typically, three successive crops over a 3-day period. – Extremes range from single crop of a few scattered lesions to a series of 5 or more crops over a 7-day period. (Usually an unaccountable number everywhere on the body)
C. Where were the lesions located? with greatest concentration usually on trunk.	<ul style="list-style-type: none"> – Lesions involve the trunk, scalp, face and extremities, – May also be in mouth, especially palate. These rupture so rapidly, they may go unnoticed.
D. What happened to lesions? What changes occurred?	<ul style="list-style-type: none"> – Typically lesions progress rapidly (*in 6-8 hours or more) from discolored spot ➡ pimple ➡ blister-like ➡ initial crust. – Drying process (from center depression to crust) 5-20 days (depending on depth of skin involvement). – Scab falls off, leaves pink depression, eventually ok, or no scarring unless secondary infection and/or picked off prematurely.
6. Did child have other symptoms?	<ul style="list-style-type: none"> – Typically low grade fever, malaise and appearance of rash. – In children, these usually appear simultaneously. – In adolescents/adults, rash may be preceded by 1-2 days of fever, headache, malaise and anorexia.
7. When history has been validated, mark the immunization record with “Had Disease” and document using Health Services stamp or write: “Disease History validated by _____, R.N.”	

SECTION 5