

NR 546 Week 7 Case Study- Child and Adolescent

Subjective	Objective
K.J.'s mother brings him in with concerns about K.J.'s inability to focus, excessive fidgeting, and impulsive behavior both at home and in school. Client's Chief Complaints: "K.J. is frequently disruptive in school and is struggling academically. His behavior has led to failing grades, and the school has issued a warning that he may face suspension if his disruptive behavior continues." Additionally, mother reports K.J. is not passing any courses and fails to turn in homework assignments he has completed. History of Present Illness K.J. has had difficulty concentrating and staying seated in class since starting school. Teachers report that he often interrupts others, is easily distracted, and has trouble completing tasks. These symptoms have been persistent for the past two years and have been affecting his academic performance and social interactions. Mother notes that K.J.'s academic performance has significantly declined over the past school year, despite efforts to provide support and encouragement at home. She reports that K.J. often expresses frustration and self-doubt about his abilities, leading to feelings of low self-esteem and avoidance of school-related activities.	Physical Examination: Physical Examination (Obtained by Pediatrician 2 Days Earlier) Vital Signs: Temperature 98.6°F, heart rate 90 bpm, respiratory rate 18 bpm, blood pressure 110/70 mmHg. General: Well-nourished, alert, and cooperative. HEENT: Normocephalic, atraumatic, pupils equal, round, and reactive to light, no ear discharge, throat clear. Cardiovascular: Normal heart sounds S1, S2, no murmurs. Respiratory: Clear breath sounds bilaterally, no wheezes or crackles. Abdomen: Soft, non-tender, no masses. Musculoskeletal: Normal gait, full range of motion. Neurological: Alert and oriented, normal reflexes and muscle tone. CN II-XII intact Skin: No lesions or edema