

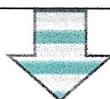
## NICU Disease Process Map

D.O.B. <u>11/6/23</u>	APGAR at birth: <u>3/5/7</u>
Gestational Age <u>314</u>	Adjusted Gestational Age <u>314-315</u>
Birthweight <sup>2</sup> <u>1185</u> lbs. <u>9.8</u> oz./ <u>1185</u> grams	
Current weight <u>2</u> lbs. <u>8.6</u> oz./ <u>1150</u> grams	

Disease Name: RDS

What is happening in the body?

Prematurity does not allow the baby to produce surfactant <sup>which</sup> stimulates breathing

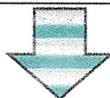


What am I going to see during my assessment?

Baby on O<sub>2</sub> (Bubble) CPAP 21%

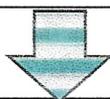
↓ O<sub>2</sub> Sat to out O<sub>2</sub>

Dyspnea  
Grunting



What tests and labs will be ordered?

ABG  
CMP



What trends and findings are expected?

Respiratory Acidosis



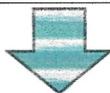
What medications and nursing interventions/treatments will you anticipate?

O<sub>2</sub>  
Surfactant  
Caffeine



How will you know your patient is improving?

↓ O<sub>2</sub> + O<sub>2</sub>Sat stays @ a good level  
↳ slowly



What are risk factors for the diagnosis?

SIDS

Apnea  
Failure to thrive due to feeding issues r/t poor dyspnea



What are the long-term complications?

if not treated pulmonary interstitial emphysema  
Hemorrhage in brain  
Pneumothorax



What patient teaching for management and/or prevention can the nurse do?

Crib/sleep safety  
allow time to breath b/w feeding  
Not multi taskers

Student Name: Xavier Briseno

Unit: NICU

Pt. Initials: \_\_\_\_\_

Date: 11/8/23

Pediatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

Allergies: Adhesives (possible)

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
D10 W = heparin	Isotonic/ Hypotonic/ <u>Hypertonic</u>	KVO / <sup>clot prevention</sup> brain dex	platelets / Blood glucose	Hyperglycemia

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?	IVP – List diluent solution, volume, and rate of administration  IVPB – List concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
				Is med in therapeutic range?			
				If not, why?			
Caffeine Citrate Cofeet	Stimulant	Respiratory Stimulant	20mg/ml 11.8mg	10mg/Kg Yes		↑HR Problems feeding irritable Urine ↑ Abdominal swelling	1. prenathe apnea & positioning 2. Bowel sounds & assessment 3. Apical HR before admin 4. ITO; may cause ↑UO
FIFO/Plant Based Lipids			20% 2.4g 0.5ml/hr				1. 2. 3. 4.
TPN			3.9ml/hr				1. 2. 3. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.