

NICU Disease Process Map

D.O.B: <u>11/08/2023</u>	APGAR at birth: <u>8 @ 1min & 9 @5 min</u>
Gestational Age <u>~34 weeks</u>	Adjusted Gestational Age: <u>34weeks 6 days</u>
Birthweight <u>5</u> lbs. <u>15</u> oz./ <u>2700</u> grams	
Current weight <u>5</u> lbs. <u>5</u> oz./ <u>2470</u> grams	

Disease Name: Gastroschisis

What is happening in the body?

Abdominal contents herniated outside the abdominal wall. Without membrane covering.



What am I going to see during my assessment?

Baby went for partial closure over the weekend. During assessment and dressing change I visualized surgical site and steri strips. Had baby not undergone surgical intervention I would have been able to visualize the abdominal contents through a prosthetic silo.

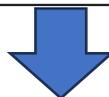


What tests and labs will be ordered?

CBC/CMP—r/o infection, anemia

Blood Culture—r/o and/or treat specific infection

Electrolyte panel—r/o electrolyte imbalances due to potential malnutrition which is a complication of gastroschisis



What trends and findings are expected?

Malnutrition & Electrolyte imbalances

Slow growth patterns due to possible malabsorption/malnutrition.



What medications and nursing interventions/treatments will you anticipate?

TPN- to help correct malnutrition and electrolyte imbalances

Pain medication

Low extremity pulses checks

Frequent bowel assessments—assessing for the return of bowel function.



How will you know your patient is improving?

Complete closure of the herniated abdominal contents.

Return of bowel function—dirty diapers and active bowel sounds

Baby begins tolerating feedings.



What are risk factors for the diagnosis?

Risk factors can include a combination of genes and other factors such as the mother's environment, diet or medicine use during pregnancy. Babies with young mothers or mothers who used alcohol or tobacco during pregnancy can put the baby at risk.



What are the long-term complications?

Malabsorption, constipation, abdominal pain, liver failure as a result of long term use of TPN, Intestinal blockage.



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

Teach parents how to clean and change dressing if needed. Teach parents s/s of infection. Educate on diet- since baby will have a harder time digesting, they may require a specialized formula/feeding schedule. Teach parents s/s of constipation.

As the nurse we need to keep a close eye on the abdominal contents prior to surgery. Utilizing good aseptic technique when touching dressing/silo.

