

NICU Disease Process Map

D.O.B. <u>10/29/23</u>	APGAR at birth: <u>6 w/min / 9 w5min</u>
Gestational Age <u>24w 2d</u>	Adjusted Gestational Age <u>38w 4d</u>
Birthweight <u>1</u> lbs. <u>5</u> oz. / <u>0.710</u> grams	
Current weight <u>5</u> lbs. <u>12</u> oz. / <u>2630</u> grams	

Disease Name: Bronchopulmonary Dysplasia (BPD)

What is happening in the body?

The bronchi in the lungs are damaged and the alveoli sacs are stiff, making it difficult to breath outside the womb

What am I going to see during my assessment?

Trouble feeding
extremely low birth weight
Premature birth
Oxygen therapy
labored breathing

What tests and labs will be ordered?

Chest X-ray
Blood test = CO₂
Echo to rule out other heart defects

What trends and findings are expected?

X-ray = lungs look spongy
Blood test = elevated CO₂, hypoxia
Echo = might reveal pulmonary hypertension



What medications and nursing interventions/treatments will you anticipate?

- Constant O₂
- Spironolactone - keep fluid off lungs
- Nutritional Supplements
- bronchodilators = to open air sacs
- possible ventilation



How will you know your patient is improving?

- Able to wean down O₂ needs
- Increased intake of formula/nutrition



What are risk factors for the diagnosis?

- males
- Preterm births
- maternal hypertensive disorder
- SGA - small for gestational age



What are the long-term complications?

- Poor growth
- ↑ BP
- lung scarring/problems
- Developmental probs.



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

- Take prescribed meds
- Know SIs of hypoxia, asthma
- Keep child away from large crowds / sick kids

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Unit: NICU

Pt. Initials: O

Date: 2/10/2024

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

Allergies: NKDA

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
-	Isotonic/ Hypotonic/ Hypertonic	-	-	-

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?			
Methadone	opiod agonist	wean off opiods	0.2mg po q12h	0.05-0.1 mg/kg/dose yes	-	-sedation -↓BP -↓HR -constipation	1. monitor BP HR 2. monitor Br/Sounds 3. monitor Alertness 4. watch breathing
Pulmicort	steroid	help open up alveoli	2ml = 0.25mg nebulizer Bx q12h	0.25-0.5mg yes	-	-runny nose -sore throat -wheezing	1. monitor O2 2. monitor HR 3. listen to lung sounds 4. watch breathing
Polyvisol	Multi-vitamin	help gain weight	.5ml po q12h	-	-	-constipation -diarrhea -upset stomach	1. mix w/ Breast milk 2. dispencc to inner cheek 3. monitor Iron level 4. watch for interactions
Mct oil	Multi-vitamin	help gain weight	1ml po q6h	-	-	-upset stomach -diarrhea -vomiting	1. monitor liver function 2. monitor cholesterol level 3. monitor weight 4. monitor I/O
Spirno-lacture	Diuretics	keep fluid off lungs	3.2mg po q12h	1-3mg/kg/d- ofc yes	-	-constipation -↑K -↓Na -headache	1. monitor I/O 2. monitor K/Na labs 3. monitor BP 4. watch & kg's