

Shamari Mims

NICU Disease Process Map

D.O.B. <u>9/30/24</u>	APGAR at birth: <u>8 9</u>
Gestational Age <u>37³</u>	Adjusted Gestational Age <u>43⁴</u>
Birthweight <u>4</u> lbs. <u>147</u> oz./ <u>2230</u> grams	
Current weight <u>6</u> lbs. <u>10.2</u> oz./ <u>3610</u> grams	

Disease Name: Gastroschisis

What is happening in the body?

At birth intestines were protruded outside the body through a hole near the umbilicus

What am I going to see during my assessment?

- Going in on assessment I should see abdominal contents exposed to the outside environment.
- Abdomen soft
- Ostomy was placed
- Stoma pink and moist

What tests and labs will be ordered?

CBC

Electrolytes (Patient on TPN)

Xray: They were checking picc line placement, but could see abdominal contents

What trends and findings are expected?

- Delayed feeding (progression to bottle) TPN is being administered
- Continuous assessment of bowel function
- Loose stools in ostomy bag

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What medications and nursing interventions/treatments will you anticipate?

1. Before ostomy, sterile care of exposed intestines
2. Provide warmth to patient
3. Antibiotics prophylactically
4. Pain medications
5. Oxygen delivery



How will you know your patient is improving?

1. Maintain body temp
2. No sign of infection
3. vital signs stable
4. weaning from TRN & bottle feeding to start (maybe gavage increased from 1 mL/hr
5. weight gain



What are risk factors for the diagnosis?

Infection



What are the long-term complications?

- chronic intestinal issues, part of the intestine was removed due to ischemia



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

1. Teach family what a stoma is supposed to look like
2. Signs of infection
3. Maintain sterile environment
4. Nutrition management & what is expected when stoma is closed