

NICU Disease Process Map

D.O.B. <u>04/19/2025</u>	APGAR at birth: _____
Gestational Age <u>37 wks</u>	Adjusted Gestational Age _____
Birthweight <u>4</u> lbs. <u>12.9</u> oz. / <u>2180</u> grams	
Current weight <u>6</u> lbs. <u>1.4</u> oz. / <u>2760</u> grams	

Disease Name: transient tachypnea / possible Chorio - treated w/antibiotics

What is happening in the body?

Fetal lung fluid remains in the lungs, causes rapid breathing



What am I going to see during my assessment?

NC 0.1 L Oxygen, rapid breathing occurs, but pt was doing very well. NO retractions noted but can be possible. Neutral thermal environment



What tests and labs will be ordered?

Room air test / done on 5/5 @ 1545 Failed
CBC 4/21
Blood CX 4/21 Neg x 2
Echd 4/19 Done in Sweetwater



What trends and findings are expected?

RR > 60 bpm, nasal flaring, grunting, retractions, diminished breath sounds or crackles.
Pt presented w/ clear lung sounds, no retraction observed.
Abdomen soft w/no distention

What medications and nursing interventions/treatments will you anticipate?

Supplemental oxygen, monitoring sats, possible IV fluids
or gavage feedings.
pt presented w/no signs of distress.
Slow nipple feeding 75 mL ab Lib

How will you know your patient is improving?

normal respirator rate and reduced need for oxygen.
goal = Room air

What are risk factors for the diagnosis?

SGA, perinatal asphyxia, macrosomia, male sex
Maternal Factors = maternal Diabetes, maternal asthma, c-section,
premature delivery

What are the long-term complications?

generally no complications, however possible link to wheezing/
Asthma.

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

ensure baby is getting enough nutrition.
monitoring for signs of respiratory distress:
nasal flaring, grunting, fast respirations

Student Name: Cynthia Rodriguez

Unit: _____

Pt. Initials: HR

Date: 04/06/25

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
N/A	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?			
Poly-Vi-Sol	Multi-Vitamin	prevent Vitamin deficiency	(0.5 ml) PO	0.5-1 ml Daily Yes		Constipation Diarrhea upset stomach	1. maintaining diet w/ vitamin as prescribed 2. change in color of stool (green) 3. possible diarrhea. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.