

## NICU Disease Process Map

D.O.B. 9/7/2025

APGAR at birth: 8, 9

Gestational Age 41w2d

Adjusted Gestational Age \_\_\_\_\_

Birthweight 8 lbs. 3 oz. / 3713 grams

Current weight 8 lbs. 2.9 oz. / 3710 grams

Disease Name: Tracheoesophageal Fistula

What is happening in the body?

Trachea and esophagus failing to connect and separate into two separate tubes connecting abnormally. This can cause breathing difficulty.



What am I going to see during my assessment?

Breathing difficulties  
feeding difficulties - choking, desatting, coughing



What tests and labs will be ordered?

Chest x-rays  
Bronchoscopy  
Esophagram

CBC  
BUN + Creatinine  
BMP



What trends and findings are expected?

- respiratory distress  
- choking, aspiration  
- feeding difficulties  
- cardiac defects

- excessive mucous, frothy, white bubbles in mouth



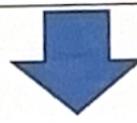
What medications and nursing interventions/treatments will you anticipate?

- airway management and prevent aspiration
- IV fluids to maintain hydration and electrolytes
- TPN for nutrition.
- fat emulsion for nutrition
- ventilation for breathing
- Sedative while under vent
- Thoracotomy + Bronchoscopy
- opioid for pain



How will you know your patient is improving?

- Reduced Respiratory distress
- improved oral feeding
- Wearing off of vent.
- follow up is improving w/xrays and swallow tests.
- in wt



What are risk factors for the diagnosis?

Trisomy 13, 18, or 21

diaphragmatic hernia

imperforate anus

Tends to present with other congenital anomalies



What are the long-term complications?

Tracheomalacia

recurrent pneumonia

Gastroesophageal reflux

esophageal strictures

esophageal dyskinesia



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

Prevent aspiration - assess RR+O2 Sats and open airway

NPO status

Teach family how to maintain airway clearance, proper positioning (high HOB), feeding strategies, and S/S of respiratory distress and aspiration.

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Unit: NICU

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

Date: 9/10/2025

Allergies: NKA

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

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?		Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
				Is med in therapeutic range?	If not, why?			
<p>Primary IV Fluid and Infusion Rate (ml/hr) _____ Circle IVF Type _____</p> <p>Sodium Acetate 7.7 mg/100ml                      heparin (PF) 0.25 units/ml in _____ (Isotonic/Hypotonic/Hypertonic)</p> <p>Source of sodium and acetate electrolytes + antiepileptics to buffer to maintain pH.</p>								
Fentanyl	Opioid	Pain	10mcg/ml mg 7.4 mcg Q2 PRN Pain	2 mcg/kg	YES	IVPB – List diluent solution, volume, and rate of administration	PH, Na <sup>+</sup> , K <sup>+</sup> , Cl <sup>-</sup> , ABG APTT, PTT	hemogram, thrombocytopenia, liver/renal, hypernatremia, fluid retention, alkalosis
Fat emulsion	Nutrient	Nutrients	3.7g IV Q12 1.54ml/hr	1g/kg/day	YES	IVPB – List concentration and rate of administration		
Midazolam	hypnotic/ Sedative	Anxiety/ Vent sedation	1mg/ml 0.37mg/ 0.37ml IV Q2 PRN	2mcg/kg	YES			1. Assess for shivering, twitching, and uncontrolled body movements; seizures. 2. Assess for evidence of depression from vomiting or over. 3. Monitor RR, HR, and RR+O2 levels. 4. Avoid rapid IV infusion.