

## NICU Disease Process Map

D.O.B.	<u>8/25/25</u>	APGAR at birth:	<u>5</u>
Gestational Age	<u>31:2</u>	Adjusted Gestational Age	<u>41:4</u>
Birthweight	<u>8.</u> lbs. <u>3.9</u> oz./	<u>3739.3</u>	grams
Current weight	<u>8</u> lbs. <u>4.6</u> oz./	<u>3760</u>	grams

Disease Name: \_ Bilateral cleft lip and palate with RDS

What is happening in the body?

The tissues of the face and mouth at the maxillary prominences didn't fuse together with the nasal prominence. This failure causes openings to the upper lip and roof of the mouth



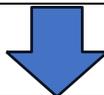
What am I going to see during my assessment?

Flat or wider nasal shape  
Openings on both sides of the lip  
Opening to the palate  
Difficulty maintaining a latch and poor suction when feeding  
Irritability, fussy, and sometimes poor wt gain



What tests and labs will be ordered?

New born screen  
Chromosomal/microarray  
BMP, OAE, echocardiogram, ultrasound, CXR, swallow study



What trends and findings are expected?

Prolonged feedings  
Inadequate oral intake  
Nasal regurgitation of milk  
Respiratory distress  
Poor weight gain



What medications and nursing interventions/treatments will you anticipate?

Analgesics: acetaminophen and morphine, and antibiotics if infection occurs, oxygen for RDS

Feed using pigeon nipple, feed smaller and more frequently, feed in upright position and give chin support, ng tube, gavage feedings, daily weights, and Surgery



How will you know your patient is improving?

Ability to latch on to pigeon nipple with less effort  
Decreased choking, and regurgitation during feeds  
Steady wt gain and good urine output  
Able to wean of oxygen



What are risk factors for the diagnosis?

Smoking during pregnancy, Use of anticonvulsants during pregnancy, Folic acid deficiency during pregnancy drinking, family history,



What are the long-term complications?

Delayed speech, frequent otitis media, hearing loss, malocclusion, flattened mid face or nasal deformity, self esteem issues



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

Use a pigeon nipple, feed in upright position with frequent burping during feedings. If blue discoloration around the mouth or extremities go to the ER. Frequent suctioning, monitor weight daily. Good oral care.

