

Student Name: Madie McKinney

NICU Disease Process Map

D.O.B. <u>2/9/20</u>	APGAR at birth <u>1min: 1/5min: 2/10min: 6</u>
Gestational Age <u>40wk 1d</u>	Adjusted Gestational Age <u>41wk 2d</u>
Birthweight <u>7</u> lbs. <u>8.6</u> oz. / <u>3419</u> grams	

Disease Name:

What is happening in the body?
The baby did not get enough oxygen and blood flow to the brain before, during, or after birth. This causes brain injury and swelling, which affects how the brain works.



What am I going to see during my assessment?
Low APGAR scores, poor muscle tone, weak or absent reflexes, & decreased responsiveness.
May also have seizures, trouble breathing, or poor feeding.



What tests and labs would I expect to see? What are those results?
ABG: May show acidosis from lack of oxygen
MRI: may show Brain injury
EEG: may show abnormal brain activity or seizures

What medications and nursing interventions or treatments will you anticipate?

Phenobarbital to manage seizure activity, VS, labs for ABGs and (or any anticonvulsant)

Phenobarbital levels, monitoring resp. status, and minimizing stimulation

Please write up any medications given or any medications that your patient is on using a separate medication sheet.



How will you know that your patient is improving?

Improved muscle tone, better responsiveness, fewer/no seizures, stable breathing + VS, labs improve, and feeding tolerance increases.



What are the primary risk factors for this diagnosis?

Birth complications such as prolonged labor, placental problems, or umbilical cord issues. Maternal conditions such as infection, HTN, or diabetes can also increase the risk of HIE.



What are the long-term complications?

Possible developmental delays, Cerebral Palsy, learning disabilities, or seizure disorders. The severity depends on how much brain injury occurred.

Student Name: Madie McKinney

Unit: NICU

Pt. Initials: Baby M

Date: 2/19/26

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

Allergies: N/A

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	N/A	N/A	N/A

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?			
Pheno-carbital	Barbituates; anti-convulsant	Prevents + controls seizures	8.6mg PO BID	yes 3-5mg/kg/d	N/A	Sedation, resp. depression, hypotension, poor feeding	1. Monitor for seizures + LOC 2. Assess VS + Resp. status 3. Monitor blood levels 4. Maintain seizure precautions + have airway equip. available
Chole-calciferol (Vit. D)	Fat-soluble vitamin	Prevents Vit. D deficiency + supports bone growth	400 units PO daily	yes 400 IU/day maintenance	N/A	rare, may see hypercalcemia	1. Administer small amount of breast milk/formula or use oral syringe 2. Monitor calcium levels + Vit. D 3. Give at same time each day 4. Monitor for signs of hypercalcemia
							1. 2. 3. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.

source: uptodate.com