

Firelands Regional Medical Center School of Nursing
Nursing Care Map

Student Name: Cassidy Hall

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Noticing/Recognizing Cues:

Highlight all related/relevant data from the Noticing boxes to develop the priority problem

Assessment findings*:

- VS: Temp 98.2 F, HR: 122, RR:58, O2: 95%
- Emesis with each feeding
- Upper lip tie
- Similac formula
- Birth weight: 6 pounds 5 oz
- Fontanel: soft and flat
- Sucking Reflux Present

Lab findings/diagnostic tests*:

- N/A no labs or diagnostic tests were done at this time.

Risk factors*:

- 1 day old
- Lack of ability to digest food
- Lack of ability to metabolize or absorb food
- Mom had a baby die 25 minutes after birth due to dwarfism
- Formula sensitivity
- Mom G6T2P0A4L1

Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

Nursing priorities*: ***Highlight the top nursing priority problem***

- **Imbalanced nutrition: Less than body requires**
- Risk of thermo regulation
- Risk for infection

Potential complications for the top priority:

- Failure to thrive
 - Decreased weight
 - Emaciated skin and bones
 - Pale in color
- Dehydration
 - Throwing up (emesis)
 - Poor skin turgor
 - Dry mucous membranes
- Hypothermia
 - Decreased temperature <97 F
 - Cold clammy skin
 - Acrocyanosis

Responding/Taking Actions:

Nursing interventions for the top priority:

1. Assess VS Q4H
Rational: To determine a change in the baby's status may see a decrease in baby's vs if nutrition is poor
2. Assess baby's fontanel's and sucking reflex Q8H
Rational: Determine if there has been a change in fontanel's or change in reflexes
3. Assess baby's weight Daily
Rational: Determine if the baby's weight has increased or decreased
4. Assess presence of emesis with each feeding PRN
Rational: Document output of emesis and to determine how much output the baby is having with each feeding by emesis
5. Assess nutritional needs of the baby and Presence of congenital abnormalities Once
Rational: To determine accurate nutritional needs for the baby and to provide accurate resources
6. Obtain dietary diary: Write down time and amount consumed with each feeding PRN
Rational: To obtain accurate intake for the baby
7. Change formula to sensitive formula Once
Rational: See if the baby tolerates it to increase overall calorie intake
8. Educate parents about need for more frequent feedings PRN
Rational: To promote improved nutrition for the baby

Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- VS: 98.0 F, HR 124, RR 36, O2: 97%
- Frontals soft and flat
- Sucking reflex present
- Weight decreases 1.04 % to 6 pounds 4 oz
- Decreased to no emesis after feed with minimal spit up
- Continue to watch baby's upper lip tie
- Change formula to Similac advance to Similac Pro Sensitive
- Continue plan of care