

# Newborn Nursing Care Plan

Patient information		
Patient name: Liam Dawson		Age: Newborn
Gender: Male	Date of birth: Sept. 17, 2024	
Medical history:		
Born with congenital heart defect (tetralogy of Fallot) Respiratory distress noted at birth Low Apgar score (6 at 1 minute, 7 at 5 minutes) Family history of genetic disorders (father with CHD) Required immediate oxygen therapy post-delivery		
Assessment		
Subjective	Objective	
Parents report difficulty breastfeeding due to Liam's fatigue and shortness of breath during feedings Mother expresses concern about Liam's cyanosis, which appears intermittently Parents are worried about his condition and seek clarity on his prognosis and care plan.	Vital signs: HR 160 bpm, RR 60 breaths/min, SpO2 88% on room air, BP 70/40 mmHg Cyanosis around lips, especially during feeding or crying. Loud systolic murmur auscultated. Oxygen therapy initiated with improvement in SpO2 to 95%. Feeding difficulty observed, with decreased suck and swallow reflex.	
Nursing diagnosis		
Ineffective airway clearance related to congenital heart defect as evidenced by cyanosis and respiratory distress. Imbalanced nutrition: less than body requirements related to difficulty in feeding due to fatigue and respiratory effort. Anxiety related to uncertainty about diagnosis and prognosis as evidenced by parents' verbalization of concern and worry.		
Goals and outcomes		
Long-term	Short-term	
Promote effective oxygenation and prevent cyanosis episodes by stabilizing airway and heart function.	Maintain SpO2 levels above 92% with supplemental oxygen within the next 12 hours.	

Long-term	Short-term
Improve nutritional intake to meet caloric needs and promote weight gain.	Ensure proper latch and encourage feeding with rest breaks within the next 24 hours.
Provide family education and emotional support throughout the treatment process.	Educate parents on congenital heart defects and coping strategies by the end of the first week.
<b>Nursing interventions</b>	
<p>Administer oxygen therapy as ordered and monitor SpO2 levels every 2 hours.</p> <p>Provide breastfeeding support with lactation consultant, allowing breaks when Liam becomes fatigued.</p> <p>Monitor heart and lung sounds for signs of deterioration.</p> <p>Educate parents on the importance of frequent feeds, signs of respiratory distress, and managing cyanosis at home.</p> <p>Provide emotional support and offer referrals to counseling services if needed.</p>	
<b>Rationale</b>	
<p>Oxygen therapy will improve tissue oxygenation and reduce cyanosis caused by the congenital heart defect.</p> <p>Supporting breastfeeding helps ensure the infant receives adequate nutrition, promoting weight gain and growth.</p> <p>Monitoring lung and heart sounds allows for early detection of complications such as heart failure or worsening respiratory distress.</p> <p>Education and emotional support will empower parents to care for their newborn confidently and help them manage the emotional stress of caring for a newborn with congenital issues.</p>	
<b>Evaluation</b>	
<p>SpO2 levels maintained above 92% with no further cyanotic episodes observed during the shift.</p> <p>Liam successfully breastfed for 5 minutes, followed by a rest period; overall intake improved.</p> <p>Parents verbalized better understanding of Liam's condition and showed comfort in managing his care.</p>	

### Additional notes

Pediatric cardiologist consult scheduled for 09/22/2024 to discuss treatment options for tetralogy of Fallot.

Will continue to monitor feeding tolerance and weight gain.

Parents provided with resources on congenital heart disease and support groups.

### Nurse's information

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