**NOTE 5**

**PATIENT 1005**

**DATE: 6/6/20**

**Patient Summary**

Patient is a 3+ month old 24 and 2/7 week gestation infant transferred from HOSP 1 with BPD, admitted for an airway evaluation. Found to have tracheomalacia on 5/24 bedside scope, awaiting more comprehensive dynamic bronch next week. Full feeds and mechanically ventilated.

**Events in Last 24 hours**  
CPAP increased to 7 due to drifts  
FiO2 up slightly to 30-35%  
Stooled with glycerin  
  
**Plan**  
CV: HDS. PDA ligation 3/29. Echo 5/9 showed no RV HTN, no PDA, PFO L to R  
Access: sLPICC placed by IR on 4/27, in RLE, central on 5/17 film with tip IVC @L1, for sedation.  
  
Resp: Moderate BPD but on very low SIMV settings. 5/24 bedside eval showed severe tracheomalacia, now s/p DLB in OR 5/31 that showed severe malacia and severe subglottic stenosis/subglottic granulomas. Planning for trach/GT (has potential OR date 6/8). Consulting ORL, pulmonary. **Lasix x1 today given increased FiO2 and positive fluid balance.**  
  
FEN: Currently, receiving 130cc/kg/d of BM 32 kcal/oz with liquid protein via NG over 90 min; will monitor very closely for feeding tolerance given h/o NEC. **Re-cal weight today to 2.8kg.** Surgery and GI tube team consulted re GT.  Glycerin q12h. Continue Ca supps, ADEKs. Monitor lytes, growth.  
  
GI/Bili: h/o medical NEC, ongoing cholestasis, improving. Previous Abd US at HOSP 1 with normal appearing biliary tree. Last Bili 1.1/0.8 5/12, monitor weekly.  
  
Heme: Recent crit 30 on 5/19, trend roughly q2weeks.  
  
Endo: TFTs sent 5/9 due to abnormal NBS, per endo normal vs sick euthyroid, repeat sent on 5/26 with elevated TSH, trend next 6/9.   
  
ID: +CMV on 5/2 (in setting of cholestasis). ID consulted, no plan for treatment currently. History: At 1 mo age developed nodular neck mass in the right submental area, s/p I&D (Grew S aureus), also blood culture + for S aureus and S epi, s/p 21 days vanco + oxacillin. R neck US without evidence of abscess 5/12  
  
Neuro: Normal HUS, last 3/21.  
  
MSK: hx of rib fractures  
  
Sedation: SBS goal 0 to -1 while intubated. Continue Precedex and morphine infusion, adjust as needed. Versed prn.  
  
Ophtho:  5/16: Stage II Zone 2 bilaterally, pre-plus, stable - follow-up eye exam today 6/6.  
  
Social: Continue to inform and support parents. Plan for family meeting tomorrow 6/7 at 11:00.  
  
RHCM:  
- Newborn screening: Elevated methionine on 2/20, possible MCAD on 3/5, repeat 3/20 normal; 4/26 elevated TSH. Send per protocol.  
- Hepatitis B Vaccination: 4/19  
- Other Vaccinations: Pentacel 4/19, HiB 4/19, Prevnar 4/20.  
- CCHD: not needed, echo  
  
Disposition: To remain at HOSP 2 NICU For airway eval and respiratory failure requiring intubation

**Weight**  
+150g (06/04/20 to 06/05/20)  
2.88kg (06/05/20)  
  
Fluid Balance (6/5/2020 07:00 to 6/6/2020 06:59) In: 406 mL / Out: 271 mL / Balance: +135 mL