

Common Neonatal Diagnoses

Lunch & Learn

March 17, 2009

GENERAL (Infant/Weight/Appropriate, Large or Small)

Term	(37-42 weeks' gestation)	
Preterm	(< 37 weeks' gestation)	___ weeks' gestation
Late Preterm	(34-36 weeks' gestation)	
Post-term	(> 42 weeks' gestation)	

Low birth weight (< 2,500 grams)

Very low birth weight (< 1,500 grams)

Extremely low birth weight (< 1,000 grams)

Appropriate-for-gestational age AGA (birth weight 10th – 90th percentile)

Large-for-gestational age LGA (birth weight > 90th percentile)

Small-for-gestational age SGA (birth weight < 10th percentile)

RESPIRATORY

Transient tachypnea of the newborn TTN retained lung fluid, term cesarean section infants

Respiratory Distress Syndrome RDS surfactant deficiency, premature infants

Pneumonia

Aspiration pneumonia

Meconium aspiration syndrome MAS meconium stained amniotic fluid

Pulmonary interstitial emphysema PIE

Pneumothorax PTX

Respiratory or pulmonary insufficiency of prematurity RIP/PIP

Chronic lung disease = Bronchopulmonary dysplasia CLD/BPD preterm still on oxygen at 36 weeks

Persistent pulmonary hypertension of the newborn PPHN

Respiratory failure 100% oxygen and nitric oxide

Apnea of prematurity AOP (Apnea, bradycardia and desaturation episodes) preterm, caffeine

CARDIOVASCULAR

Patent ductus arteriosus PDA preterm, neoprofen, indomethacin

Patent foramen ovale PFO

Hypotension volume boluses, dopamine, dobutamine

HEMATOLOGY

Anemia packed red blood cells, epo, ferrous sulfate, polyvisol

Thrombocytopenia decreased platelets < 150,000

Leukopenia low white blood cell count < 6

Neutropenia low absolute neutrophil count ANC < 1,500

Disseminated intravascular coagulopathy DIC bleeding; elevated PT, PTT; decreased fibrinogen

Leukemoid reaction white blood cell count > 40

INFECTIOUS DISEASE

Sepsis evaluation/Rule out sepsis/Sepsis screen CBC, +/- blood culture, +/- antibiotics (48 hrs)

Suspected, Presumed or Possible sepsis/Moderate to high risk of infection Negative blood culture, mother pretreated, clinical suspicion, abnormal screening blood work, 7 to 14 days of antibiotics

Sepsis, confirmed organism will be identified

Suspected, Presumed or Possible Meningitis abnormal CSF findings

Feeding Intolerance residuals, apnea/bradys/desats

Suspected gastroesophageal reflux reflux precautions, feedings by pump over 1-2 hours,
transpyloric tube feedings

Hypoglycemia

Hyperglycemia

Hypermagnesemia

Hyponatremia

Hypernatremia

Hypocalcemia

Hypercalcemia

Hypophosphatemia

Hyperphosphatemia

Osteopenia of Prematurity OOP elevated alkaline phosphatase, calcium phosphate tribasic