

Leading Person-Centered Care



Chamberlain University College of Nursing

NR 529: Leadership and Management within the Clinical Healthcare Environment



Part 1: Case Scenario

The patient is an eleven-month-old female with a past medical history of prematurity, born at thirty-six weeks and six days gestational age. The patient has Loeys-Dietz syndrome (a genetic disorder affecting the connective tissue), aortic dilation status post aortopexy within the last year, ventricle septal defect, tracheomalacia, OSA (obstructive sleep apnea), GJ-tube dependence, and cardiac arrest. After twenty-five days, the patient was recently discharged from the Pediatric Intensive Care Unit. The patient was admitted to the PICU (Pediatric Intensive Care Unit) for acute hypoxic respiratory failure requiring intubation and mechanical ventilation. For this paper, the patient will be referred to as Sophia to protect the patient's identity. Sophia has a tracheostomy that will require a ventilator in the home. Sophia's parents and grandmother are supportive and involved in Sophia's care in the hospital and home environment. Grandmother is a Registered nurse who works in a Neonatal Intensive care unit and an excellent supportive system. Sophia has a complicated medical history and requires care 24 hours daily.

Related health concerns with Sophia started at birth with ventral septal defect, OSA, and tracheomalacia. Several weeks after Sophia's birth, she developed shortness of breath and cyanotic episodes. After a bronchoscopy in the operating room, Sophia was found to have tracheomalacia, requiring immediate intubation. Sophia was later transferred to a higher level of care for further management due to the increased risk of decompensation. Due to the patient's critical status, many specialists were involved in her care. After weeks and months, the Intensivists and Neonatologists are confident that Sophia will require tracheostomy care and go home on a ventilator. Issues of concern that must be addressed inpatient include home ventilator therapy education, pulmonary toiletry by respiratory therapists, and comfortability of parents and grandmother with tracheostomy care, cleaning, and ventilator management for home care. The