

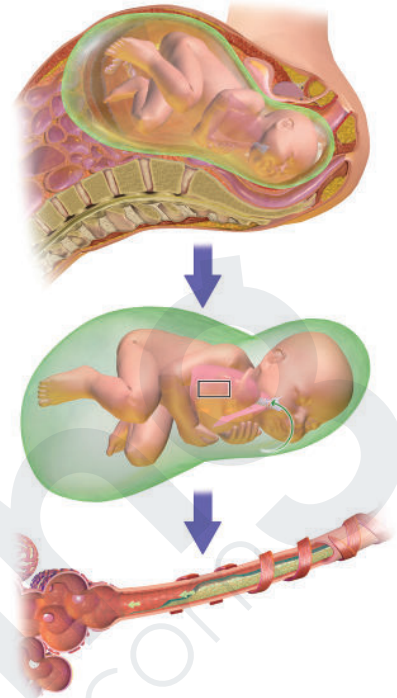
MECONIUM ASPIRATION PATHOCHART

PATHOPHYSIOLOGY

Meconium is the sterile substance that is produced in the baby's intestines during gestation and is normally passed like stool for the first few days after birth. When meconium is passed in utero and mixed with amniotic fluid, the baby may inhale, or aspirate, the meconium-stained fluid before or during labor/delivery. This thick meconium can irritate and block baby's airway. Meconium does not usually develop before 34 weeks gestation, so this is usually found in babies born at term.

ASSESSMENT FINDINGS

- Tachypnea
- Nasal flaring
- Retractions
- Cyanosis
- Expiratory grunting
- Yellow-green urine
- Yellow-green staining of fingernails or skin



Meconium Aspiration Syndrome

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DIAGNOSTICS

- Clinical Findings
- Pulse Oximetry (infant)
- Arterial Blood Gas (infant)
- Chest x-ray

NURSING PRIORITIES

- Promote Adequate Oxygenation
- Optimize Gas Exchange
- Ensure Adequate Airway Clearance

THERAPEUTIC MANAGEMENT

- Assess and monitor respiratory status
- Suction nose and mouth
- Supplemental oxygen
- May require mechanical ventilation
- Prevent lung infection
- Monitor ABGs for ARDS

MEDICATION THERAPY

- Surfactant
- Antibiotics