

OR is a 1y ex-FT female IUTD with h/o prior admission in 3/19 for RSV bronchiolitis p/w 3d h/o dry cough and runny nose. Mother reports 1d of non-bloody diarrhea x4 episodes over the weekend – resolved and 2x episodes of nbnb post-tussive vomiting – resolved. Reports decreased PO intake yesterday. Patient woke up at 3AM this morning and mother reports inc. belly breathing that prompted ED visit. No fevers, rashes. Voiding 5-6x daily. Recent travel to Boston past weekend. Denies sick contacts.

BHx: FT, NSVD, No complications

PMH: RSV bronchiolitis req. HFO2

PSH: None

Allergies: None

Meds: None

Imm: UTD

Development: Meeting milestones appropriately.

Social: Lives at home with mom and dad, non-smokers.

FHx: No FHx of atopic diseases (no asthma, allergies, eczema)

ED Course

VITALS (last 24h) [retrieved for REYES, OLGA at 20 Jun 2019 08:19]:

Tc: 37.3 Tmax: 37.3 @ 20 Jun 08:06

HR: 121 (121 - 121)

RR: 48 (48 - 48) | SpO2: 96% (96% - 96%)

PE

GENERAL: Well-nourished, well-developed, well-hydrated, no distress.

EYES: Sclera non-icteric and not red, no conjunctival injection, no eye discharge.

HEENT: Moist mucus membranes. No lesions in the mouth. Oropharynx with no ulcers. Crusting around nares. Nasal flaring.

EARS: L ear reddened, R ear unremarkable.

NECK: No masses.

CARDIOVASCULAR/HEART: Regular rate & rhythm, no murmurs, normal peripheral pulses.

RESPIRATORY/CHEST: Chest clear to auscultation bilaterally, no retractions. Expiratory and inspiratory wheezing.

GI/ABDOMEN: Normoactive bowel sounds, soft, non-tender, non-distended. Abdominal breathing.

SKIN: No rash or lesions to skin. Diaper area with no rash.

MUSCULOSKELETAL: No swollen joints.

LYMPHATIC: No swollen lymph nodes.

NEUROLOGIC: Alert. Normal tone. Moves all extremities equally.

Labs/Tests

None

Interventions/Treatments

Decadron 6.2 mg PO, 3x B2B Duo-Nebs, 2L O2 via NC, IV placed, 200cc NSB x 1. Patient admitted to IMU for hypoxia, wheezing, URI, and vomiting.

PIMU

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CARDIOVASCULAR/HEART: Regular rate & rhythm, no murmurs, normal peripheral pulses.
RESPIRATORY/CHEST: Chest clear to auscultation bilaterally, no retractions, no wheezing, no rhonchi, no rales.
GI/ABDOMEN: Normoactive bowel sounds, soft, non-tender, non-distended. Abdominal breathing.
SKIN: No rash or lesions to skin. Diaper area with no rash.
MUSCULOSKELETAL: No swollen joints.
LYMPHATIC: No swollen lymph nodes.
NEUROLOGIC: Alert and active. Normal tone. Moves all extremities equally.
EXTREMITIES: no cyanosis. Cap refill <2s throughout.

A/P:

Olga Reyes is a 1y female IUTD with h/o RSV bronchiolitis admitted to PIMU for hypoxia in the setting of bronchiolitis. She is hemodynamically stable.

Bronchiolitis
Albuterol q2h
2L O2 NC prn to maintain O2Sat > or = to 90%

Fever
APAP prn
Ibuprofen prn

FEN/GI
D5NS w/ 10mEq KCl @42cc/hr
Infant Diet (Formula)