

# TTN PATHOCHART

## PATHOPHYSIOLOGY

Transient Tachypnea of the Newborn (TTN) is tachypnea (respiratory rate above 60 bpm) and possible respiratory distress in a newborn. TTN is thought to be due to retained fluid in the lungs. This increases airway resistance and decreases compliance, and is the number one cause of respiratory distress in newborns. It typically resolves itself within 24-48 hours, but the infant may require airway and oxygenation support.

## ASSESSMENT FINDINGS

- Tachypnea
- Intercostal retractions
- Grunting
- Nasal flaring
- General cyanosis
- Abnormal breath sounds

## DIAGNOSTICS

- Clinical findings
- Chest x-ray
- Pulse oximetry
- Arterial blood gas

## NURSING PRIORITIES

- Ensure adequate oxygenation
- Promote optimal gas exchange
- Emotional support

## THERAPEUTIC MANAGEMENT

- Supplemental O<sub>2</sub>
- Educate mother/support system
- Monitor oxygen saturation and work of breathing
- Mechanical ventilation if necessary
- Monitor ABGs for ARDS
- Provide emotional support

## MEDICATION THERAPY

- No proven medication therapies
- IV fluids & Tube feedings as needed