











May 4, 2018 Possible trend towards fetal Intrauterine growth restriction (IUGR)

MFM: Visualization of cord was compromised secondary to an active fetus

> May 10, 2018 Non-reactive stress test

MFM: Biophysical profile achieves a score of 8/8.



May 14, 2018

Basic Information

CC: transfer for suspected ruptured liver hematoma and HELLP

HPI: 41 yo G2P0010 presented to Pineville ED and noted to have IUFD at 35.4 wks GA. Arrived with alterered mental status and weakness. Noted to have AST 1629 and AST 1212, Cr 1.43, plts 114, WBC 25 and Hgb 9.6. She also had n/v. Denies HA, vision changes, chest pain, RUQ pain. She was tachycardia and had 2L O2 requirement. CTA was obtained which showed hemoperitoneum likely 2/2 ruptured liver hematoma in setting of HELLP. Emergent transport arranged to CMC Main, accepted as ED to ED transfer.

PRENATAL COURSE REMARKABLE FOR:

- 1. AMA
- 2. UGR
- 3. Elevated dopplers

PREFERRED LANGUAGE: English

Jace A. Isaac 5/15/2018 12:20 AM 4lbs 8oz





1. Exploratory laparotomy, evacuation of hemoperitoneum, hysterotomy (5/15/18)

3. Emboliation of right and left hepatic arteries by Interventional Radiology (5/15/18)

4. Abdominal washout, repacking of abdomen, and abthera wound vac placement (5/17/18)

5. Abdominal washout, removal of intraabdominal packing, closure of abdomen (5/19/18) 6. Repair of fascial dehiscence with mesh, placement of wound vac (5/29/18)

7. Hepatectomy, resection of liver; partial lobectomy; Marsupialization of cyst or abscess of liver (6/12/2018).

2. Abdominal washout and evacuation of hemoperitoneum (5/15/18)





"Of all the forms of inequality, injustice in health care is the most shocking and inhumane"

- Martin Luther King, Jr.

Jace's Journey 5K and Fun Run



October 24, 2019

Communicate. Educate. Advocate



Doula Supported Births Doula Scholarships **FB Live Interviews** Community Baby Shower Wellness Fair

