

N201- Nursing Care of Special Populations Diagnosis of Pregnancy

Signs of Pregnancy

- ❖ Subjective or Presumptive signs
 - Symptoms or changes felt by woman
- ❖ Objective Signs
 - Probable-changes noted by the healthcare provider
- ❖ Positive-diagnostic findings
 - Only attributed to presence of fetus

Subjective / Presumptive Signs

- ❖ Amenorrhea
 - Absence of menses
 - Earliest symptom
- ❖ Nausea and Vomiting of Pregnancy aka Morning Sickness
 - Most common in First Trimester
- ❖ Excessive Fatigue
 - 1st & 3rd trimesters
- ❖ Urinary Frequency
 - 1st & 3rd trimesters
 - Growing uterus, uterus rises into pelvis, fetal positioning
- ❖ Breast Changes
 - Hormone induced growth of the ductal system in preparation for milk
 - Breast engorgement
 - * Tenderness and tingling
 - *Superficial veins
- ❖ Quickening
 - Mother's first awareness of fetal movement
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Objective/Probable Signs

- ❖ Observed by healthcare provider
- ❖ Not definitive diagnosis
- ❖ Changes in pelvic organs caused by pregnancy hormones

- ❖ Goodell's Sign
 - Softening of the cervical tip
 - Increased vascularity, hypertrophy, hyperplasia, edema, elasticity
 - Non-pregnant: feels like tip of nose (firm)
 - Pregnant: feels like ear lobe (softer)

- ❖ Chadwick's Sign
 - Change in color of the cervix, vagina, and vulva
 - Red, purple, bluish color r/t increased blood flow

- ❖ Hegar's Sign
 - Softening of isthmus of uterus
 - On exam it feels thin
- ❖ McDonald's Sign
 - Ease in flexing the body of the uterus against the cervix
- ❖ Skin pigment changes
 - ❖ Facial Chloasma
 - ❖ Linea Nigra
 - ❖ Abdominal Striae
 - ❖ Breast Changes
- ❖ Fetal Outline
 - able to palpate fetal parts
- ❖ Ballottement
 - palpate a floating fetus.
 - gentle returning tap
 - strongest probable sign
- ❖ Positive Pregnancy Test
 - Blood or urine tested for hCG
 - Hormone secreted by the trophoblast
 - Could be false positive r/t _____
 - NOT considered positive sign

Diagnostic or Positive Signs

- ❖ Attributed to fetal presence
- ❖ **Conclusive** proof of pregnancy
- ❖ **Cannot** be confused with any pathological state
- ❖ **Completely** objective
- ❖ Fetal Heartbeat
 - Fetoscope at 17- 20 wks
 - Doppler at 8 – 10 wks
 - Obesity or hydraminos may impede auscultation
- ❖ Fetal Movements-palpated at 20 weeks
- ❖ Ultrasound
 - sound waves convert the fetus to a picture for examination
 - Fetal U/S: gestational sac at 4-5 weeks
 - Transvaginal U/S: gestational sac at 10 days