

Student Name: _____ Date: _____

(OB) Critical Thinking Worksheet

<p>1. Diagnosis:</p> <p>Age:</p> <p>Race:</p> <p>Marital Status:</p> <p>Allergies:</p> <p>LMP:</p> <p>EDD:</p> <p>Gestational Age:</p> <p>G: ___ P: ___ L: ___</p>	<p>2. Maternal Information:</p> <p>Delivery Date and Time:</p> <p>Type of Delivery:</p> <p>Incision or Lacerations:</p> <p>If C/S, reason:</p> <p>Anesthesia/Analgesia in L & D:</p> <p>QBL: BTL:</p> <p>Method, Frequency & Type of Feeding:</p>	<p>3. Maternal Information:</p> <p>Foley: Voiding Past Removal:</p> <p>IV:</p> <p>V/S:</p> <p>Activity:</p> <p>Diet:</p> <p>Procedures:</p> <p>Maternal Significant History, Complications, Concerns:</p>
<p>4. Lab Values-Maternal:</p> <p>Blood Type: Antibodies:</p> <p>RhoGAM given at 28-32 Weeks:</p> <p>Antenatal Screening:</p> <p>Rubella: VDRL/RPR/Treponemal:</p> <p>HIV: Gonorrhea: Chlamydia:</p> <p>HBsAg: GBS: AP H&H:</p> <p>1 Hr. Glucose Screen: 3 Hr. GTT:</p> <p>PAP: PP H&H:</p> <p>Other Labs:</p> <p>Type and Screen for RhoGAM Needed?</p>	<p>5. Newborn Information:</p> <p>Sex:</p> <p>Apgars: 1: 5: 10:</p> <p>Weight: Length:</p> <p>Admitted to NBN NSY: NICU:</p> <p>Voided: Stooled:</p> <p>Newborn Complications, Concerns:</p>	<p>6. Lab Values/Procedures-Newborn:</p> <p>POC Glucose: Blood Type:</p> <p>Bilirubin: Saturation:</p> <p>Other Labs:</p> <p>Hearing Screen:</p> <p>Circumcision:</p>

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7. Focused Nursing Diagnosis:	11. Nursing Interventions related to the Nursing Diagnosis in #7: 1.	12. Patient Teaching: 1. 2. 3.
8. Related to (r/t):	Evidenced Based Practice: 2.	
9. As evidenced by (aeb):	Evidenced Based Practice: 3.	13. Discharge Planning/Community Resources: 1. 2. 3.
10. Desired patient outcome:	Evidenced Based Practice:	