

Student Name: Melanie Lemmon

Date: 1/24/2022

IM6 (OB) Critical Thinking Worksheet

<p>1. Diagnosis: S/P Repeat C-Section</p> <p>Age: 36</p> <p>Race: Hispanic</p> <p>Marital Status: Single</p> <p>Allergies: NKDA</p> <p>LMP: 4-14-21</p> <p>EDD: 1/29</p> <p>Gestational Age: 39.2</p>	<p>2. Maternal Information:</p> <p>Delivery Date and Time: 1-24-22</p> <p>Type of Delivery: C-section</p> <p>Incision or Lacerations: Lower abdominal transverse incision</p> <p>If C/S, reason: scheduled elective</p> <p>Anesthesia/Analgesia In L & D: Spinal</p> <p>EBL: 688 ml BTL: -</p> <p>Method, Frequency & Type of Feeding: Breast & Bottle</p>	<p>3. Maternal Information:</p> <p>Foley: No Fund/voiding Past Removal:</p> <p>IV: NS @ 40ml/hr</p> <p>V/S: 97w</p> <p>Activity: Bedrest</p> <p>Diet: clear</p> <p>Procedures: C-Section</p> <p>Maternal Significant History, Complications, Concerns: H/O C-section, H/O D+G for cervical polyps, H/O PDS seasonal allergies</p>
<p>4. Lab Values-Maternal:</p> <p>Blood Type: O+</p> <p>Antibodies:</p> <p>RhoGAM given at 28-32 Weeks: No</p> <p>MSAFP/Quad Screen: N/A CVS/Amnio: N/A</p> <p>Rubella: Immune VDRU/RPR: non-reactive</p> <p>HIV: <input checked="" type="radio"/> Gonorrhea: <input checked="" type="radio"/> Chlamydia: <input checked="" type="radio"/></p> <p>HBSAg: <input checked="" type="radio"/> GBS: <input checked="" type="radio"/> AP H&H: 13.5/35.1</p> <p>1 Hr. Glucose Screen: 3 Hr. GTT:</p> <p>PAP: PP H&H: 11.4 / 33.2</p> <p>Other Labs:</p> <p>Type and Screen for RhogAM Needed? N/A</p>	<p>5. Newborn Information:</p> <p>Sex: male</p> <p>Appears: 1: 8 5: 9 10:</p> <p>Weight: 7.602 Length: 19.5</p> <p>Admitted to NBN NSV: NICU: No</p> <p>Stayed w/ mom:</p> <p>Voided: yes Stooled: yes</p> <p>Newborn Complications, Concerns: Newborn assessment, VS HE RPOD Initial 136, 50 30 min, 148, 52 1 hr 98, 144, 50, 166, 134 EES ointment - 0.5% i tube Vitamin K 0.5 mg IM to <input checked="" type="radio"/> Hep B - Refused</p>	<p>6. Lab Values/Procedures-Newborn:</p> <p>POC Glucose: 81 Blood Type: O+</p> <p>Bilirubin: 5.7 Saturation: N/A</p> <p>Other Labs: PH 7.26</p> <p>Hearing Screen: passed</p> <p>Circumcision: Refused</p>

Student Name: Melanie Lerman

Date: 1/27/2022

<p>7. Focused Nursing Diagnosis: <u>Risk for altered body temperature</u> <u>Risk for impaired gas exchange</u></p>	<p>11. Nursing Interventions related to the Nursing Diagnosis in #7: 1. The newborn should be placed into the radiant warmer after drying of the completely or placed skin to skin the mother after drying off. Assess axillary temp every hour until stable Evidenced Based Practice: 2. Monitor respirations and skin color for cyanosis</p>	<p>12. Patient Teaching: 1. Newborns are placed supine. No toys or loose items are to be placed in the parent's to mother should be in close proximity. 2. Instruct parents that newborn should hold at least once within 24' period & should have a B19 with 24 to 48' after birth with the newborn fed on demand. 3. Feedings should be started immediately following birth breast feeding is initiated as soon as possible</p>
<p>8. Related to (r/t): immature thermoregulation <u>Ante partal stress or excessive secretions in resp. passages</u></p>	<p>Evidenced Based Practice: Clean airway as indicated Administer oxygen if needed 3. Breathe syringe & within reach at all times Instruct family on how to use.</p>	<p>13. Discharge Planning/Community Resources: 1. Provide family education while performing all nursing care. Encourage family involvement, allowing mother to perform newborn care with direct supervision. 2. Setup lactation services for breast feeding mother. Discharge teaching will include newborn care re: bathing umbilical cord care, car seat safety, newborn behavior feeding and elimination and clinical findings of concern to report to the provider</p>
<p>9. As evidenced by (a/e/b): <u>Axillary temp. of less than than 96.7. Breath rate increased, resp. rate</u> <u>Bradypnea, tachypnea, nasal flaring, grunting, grunting, labored breathing</u></p>	<p>10. Desired patient outcome: <u>Infant will be free from signs of acid stress</u></p>	<p>Evidenced Based Practice: Instruct parents to post emergency card if any respiratory changes are noted.</p>
<p>10. Desired patient outcome: <u>Infant will be free from signs of acid stress</u> <u>airway</u></p>	<p>Evidenced Based Practice: Instruct parents to post emergency card if any respiratory changes are noted.</p>	<p>13. Discharge Planning/Community Resources: Discharge teaching will include newborn care re: bathing umbilical cord care, car seat safety, newborn behavior feeding and elimination and clinical findings of concern to report to the provider</p>

Adopted: August 2016, revised October 2018

After the birth we stayed in the nursery where Shelby was assigned.

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IV Type Isotonic <input type="checkbox"/> Hypotonic <input type="checkbox"/> Hypertonic <input type="checkbox"/>	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complication

Student Name: <i>Melanie Elman</i>		Unit: <i>Messing</i>	Patient Initials: <i>Newborn B.B</i>		Date: <i>1/24/22</i>	Adverse Effects <i>NICDA</i>	Appropriate Nursing Assessment, Tea Interventions (Precautions/Contraindications)
Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Correct Dose? If not, what is correct dose?	IVP - List diluent solution, volume, and rate of administration IVPB - List concentration and rate of administration		
<i>EES</i>	<i>macrolides</i>	<i>Prophylactic eye care</i>	<i>1 tube to both eyes x 1</i>	<i>400</i>	<i>N/A</i>	<i>Red</i>	<i>Assess for infection</i>
<i>Vitamin K</i>	<i>fat soluble vitamins made in the liver</i>	<i>Prevent hemorrhagic disorders</i>	<i>D. 5mg IM to vastus lateralis once</i>	<i>400</i>	<i>N/A</i>	<i>erythema pain @ injection site swelling</i>	<i>Monitor for frank and occult bleeding Apply pressure to site for 5 minutes.</i>

Print Student Name: Melanie Inman
Unit: Nursery

Clinical Week # 3, 5, 6

EVALUATION OF PRECEPTOR BY STUDENT

Name of Preceptor: Shelby Carman

Clinical Unit: Nursery

Please rate your preceptor on each statement 1=Never/Poor 2=Seldom/Mediocre 3=Sometimes/Good 4=Often/Very Good 5=Always/Superb	Rating Please circle one				
	1	2	3	4	5
Establishes a good learning environment (approachable, nonthreatening, enthusiastic, etc.)					(5)
Stimulates me to learn independently					(5)
Allows me autonomy appropriate to my level/experience/competence					(5)
Organizes time to allow for both teaching and care giving					(5)
Offers regular feedback (both positive and negative)					(5)
Clearly specifies what I am expected to know and do during the training period					(5)
Adjusts teaching to my needs (experience, competence, interest, etc.)					(5)
Asks questions that promote learning (clarifications, probes, socratic questions, reflective questions, etc.)					(5)
Give clear explanations/reasons for opinions, advice, or actions					(5)
Adjusts teaching to divers settings (bedside, charting, nurses station, etc.)					(5)
Coaches me on my clinical/technical skills (patient history, assessment, procedural, charting)					(5)
Incorporates research data and/or practice guidelines into teaching					(5)
Teaches diagnostic skills (clinical reasoning, selection/interpretation of tests, etc.)					(5)
Teaches effective patient and/or family communication skills					(5)
Teaches principles of cost-appropriate care (resource utilization, etc.)					(5)

1. What did you like best about your preceptor? Friendly and informative, answered all my questions without making me feel inadequate.

2. Do you have any suggestions for your preceptor to consider when working with future students?
n/a

Student Signature: Melanie Inman

Date: 2/14/2022

Print Student Name: Melanie Inman
Unit: nursery

Clinical Week # 3,5,6

LVN-RN PRECEPTORSHIP: STUDENT SELF-EVALUATION

1. Please reflect on your performance during the LVN-RN preceptorship and rate yourself on the following:

[Place a ✓ in the appropriate box]

(Graduate Competency-GC)	I need significant guidance.	I need average guidance.	I need minimal guidance.
I use the Nursing Process to provide comprehensive, evidence-based nursing practice. (GC 1)		✓	
I coordinate and develop a plan of care using time management and prioritization. (GC 1 & 3)			✓
I make safe clinical decisions. (GC 3)			✓
I advocate for patient/family rights and quality nursing practice. (GC 4)			✓
I use professional, assertive, and collaborative communication. (GC 2, 5, & 6)			✓
I document according to agency/unit standards. (GC 2)			✓
I develop teaching/learning strategies to meet patient/family needs. (GC 3 & 7)		✓	
I assume a leadership role in clinical practice. (GC 6)			✓
I am self-directed and demonstrate an interest in learning. (GC 8)			✓

2. What do you think are your personal strengths? *Eager to learn.*

3. What have you identified as a personal opportunity for improvement? *With each new clinical setting, I'm learning a variety of different things. Learning to be more confident in my skills.*

Student Signature: Melanie Inman

Date: 2/14/2022

Print Student Name: Melanie Inman
Unit: mom + baby, nursery

Clinical Week # 3, 5, 6

LVN-RN Preceptor Appraisal of Student Performance
(Preceptor Completes and Reviews with Student)

1. Please reflect on the student's clinical performance during the capstone preceptorship and rate the following: **[Place a √ in the appropriate box]**

(Graduate Competency-GC)	Below Average Performance Needs Significant Guidance	Satisfactory Performance Needs Average Guidance	Outstanding Performance Needs Minimal Guidance
Student uses the Nursing Process to provide comprehensive, evidence-based nursing practice. (GC 1)		✓	
Student coordinates and develops a plan of care using time management and prioritization. (GC 1 & 3)			✓
Student makes safe clinical decisions. (GC 3)			✓
Student advocates for patient/family rights and quality nursing practice. (GC 4)			✓
Student uses professional, assertive, and collaborative communication. (GC 2, 5, & 6)			✓
Student documents according to agency/unit standards. (GC 2)			✓
Student develops teaching/learning strategies to meet patient/family needs. (GS 3 & 7)		✓	
Student assumes a leadership role in clinical practice. (GC 6)			✓
Student is self-directed and demonstrates an interest in learning. (GC 8)			✓

2. What do you think are the student's personal strengths?

Melanie is eager to learn and is never afraid to ask questions!

3. What have you identified as an opportunity for improvement for the student?

Nursery is out of her comfort zone, but she did great! Be confident in your skills!

Preceptor Print & Sign: Shelby Carman RN / Shegumi RN

Date: 02/14/22

Student signature: Melanie Inman

Date: 2/14/22

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Print Student Name: Melanie Inman Clinical Week # 3 + 6
Unit: _____ 5

Time & Attendance Record of Precepted Clinical Experiences
(To be filled out daily at the end of each shift.)

Date:	Total Hours:	Location:	Preceptor: Print & Signature (Please print legibly)
1/24/2022	12	Mom + Baby Nursery ✓	Print: Shelby Carman RN Signature: Shelly Carman RN
1/27/2022	12	Mom + Baby Nursery ✓	Print: Shelby Carman RN Signature: Shepman RN
1/31/2022		Bed	Print: _____ Signature: _____
2/8/22	12	Mom + Baby Nursery ✓	Print: Shelby Carman RN Signature: Shelly Carman RN
2/14/22	12	nursery	Print: Shelby Carman RN Signature: Shepman RN
			Print: _____ Signature: _____

making up days

****Important to keep up with and submitted to your advisor****

Print Student Name: Melanie Inman Clinical Week # 3, 5, 6
Unit: nursery

Clinical Preceptorship Attendance Policy

LVN-RN Track CSON

You must complete **192 hours** with your preceptors. The goal is to transition from the student nurse to the RN role by working **12-hour shifts**.

- The time prior to the shift starting and the time after does NOT count extra. **0645-1915 is simply a 12-hour shift**. If circumstances arise where you are staying later than 30 minutes, please let your faculty advisor know.
- Schedules must be submitted to your assigned **faculty advisor** via LMS drop box, LMS email, or text to your faculty advisor. Notify faculty advisor by text message or phone call of ANY changes to schedule, illness or getting pulled to a different unit. Promptness is expected so faculty is aware of your presence on the unit. **Failure to notify faculty will result in a clinical absence.**
- **Do not** pre-fill your Record of Precepted Clinical Experiences. You need to document your actual time after each shift and have your preceptor sign it.
- Submit a copy of your Record of Precepted Clinical Experiences with both your midterm and final evaluation.

Student Signature: Melanie Inman Date: 1/24/2022

Student Name: *Melanie Luman*

Rotation	How many patients were under your supervised care? Briefly describe what was going on with your patients? Include age & sex, no initials please! What did you learn?	What skills did you have opportunity to perform? Ex: IV start, medication administration, V/S, teaching, assessment, etc..
Block/Week: <i>1/3</i> Dates: <i>1-24</i> Unit: <i>Nursery</i> Assigned: _____ Preceptor: <i>Shelby C</i> Other Preceptor: _____	<p><i>2 day old male, VDS (+) Meth CPS removal today. prenatal care.</i></p> <hr/> <p><i>36 Female scheduled G-section G 2 P 2 H/o cervical fibroid, PCOS</i></p> <hr/> <p><i>newborn male 7.602, observed, initial assessment, Apgar scoring, Hgt, wgt, medication administration Vitamin K, EES oint, to eyes, 30 min VS 1 hour VS</i></p>	<p><i>V/S, Bottle feed, change diapers</i></p>
Block/Week: _____ Dates: <i>1/27</i> Unit: <i>Nursery</i> Assigned: _____ Preceptor: _____ Other Preceptor: <i>Shelby C</i>	<p><i>1 day old male</i></p> <hr/> <p><i>1 day old female</i></p> <hr/> <p><i>1 day old male</i></p>	<p><i>240 bath, PKU, feed</i></p> <hr/> <p><i>240 bath, glucose PKU, feed</i></p> <hr/> <p><i>assist in circumcision</i></p>

Please fill this out during your rotation and email to your advisor. Look at your clinical grid to see the week of your clinical assignment. If you had a different preceptor other than your assigned one, include their name (first, last), have them also sign your "Record of Precepted Clinical Experiences" sheet, complete an evaluation on your performance, and you complete an evaluation on them also.

Student Name: *Melanie Sumner 2/8/22*

Rotation	How many patients were under your supervised care? Briefly describe what was going on with your patients? Include age & sex, no initials please! What did you learn?	What skills did you have opportunity to perform? Ex: IV start, medication administration, V/S, teaching, assessment, etc...
Block/Week: <i>5 / makeup day</i> Dates: <i>2/8/22</i> Unit: <i>218/22</i> Assigned Preceptor: <i>Shelby</i> Other Preceptor:	<i>1 day old male</i> <i>7-8-22 NB Boy</i>	<i>Bath, PUA test</i> <i>Glucose</i> <i>Appar, V/S, meds assessment,</i>
Block/Week: <i>1</i> Dates: <i>2/14</i> Unit: <i>218/22</i> Assigned Preceptor: <i>Shelby</i> Other Preceptor:	<i>1 day old Fe, elevated Bilirubin</i> <i>1 day old male</i> <i>1504 NB male</i>	<i>Bil light, feed, change diapers</i> <i>24' Bath, PUA, feed</i> <i>Bili light,</i> <i>weight measurement</i> <i>metals, eye prophylactic</i> <i>foot prints</i>

Please fill this out during your rotation and email to your advisor. Look at your clinical grid to see the week of your clinical assignment. If you had a different preceptor other than your assigned one, include their name (first, last), have them also sign your "Record of Precepted Clinical Experiences" sheet, complete an evaluation on your performance, and you complete an evaluation on them also.