IM6 OB Simulation Patient Preparation Worksheet

RECOGNIZE & ANALYZE CLUES
This section is to be completed prior to Sim Day 1:

Student Name: Kaitlynn Basquez
Patient initials: AJ   Admit Date: 8/21/23
Diagnosis: G 2   P 1   AB 0   L 1   M 0
EDD: 3 / 27 / XX   Gest. Age: 39 wks
Blood Type/Rh: O/+   Rubella Status: Immune   GBS status: Positive
Obstetrical reason for admission: Delivery, Group B Strep (+)
Complication with this or previous pregnancies: None
Chronic health conditions: Asthma
Allergies: Penicillin
Priority Body System(s) to Assess: Respiratory, Cardiac, VE

Pathophysiology
Interpreting clinical data collected, what is the primary/current medical/obstetrical problem?
State the pathophysiology of this problem in your *own* words.

Medical/Obstetrical Problem	Pathophysiology of Medical/Obstetrical Problem
Group B Strep (+)	Group B strep is a bacteria that is commonly found in the vagina and rectum. This is a concern due to it is fatal if passed to baby.
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Respiratory Distress, Inability to Stabilize temp	Usually due to inadequate pulmonary surfactant or "lung immaturity".

Problem Recognition
To prevent a complication based on the primary medical problem, answer each question in the table below.

Question	Most Likely Maternal	Most Likely Fetal	Worst Possible Maternal	Worst Possible Fetal
Identify the most likely and worst possible complications.	Post Partum Infection	Cord compression	Uterine Inversion/Death	Shoulder Dystocia
What interventions can prevent them from developing?	Maintaining Standard precautions	Turning mom frequently	Frequent assessments of abd, and VE	If found early opt for C-section
What clinical data/assessments are needed to identify complications early?	VS, labs, wound assessments	Frequent FHR monitoring & Fetal monitoring	Lower abd pain Fundal assessment	~~Irregular contractions~~ or There aren't any
What nursing interventions will the nurse implement if the anticipated complication develops?	Obtain labs/cultures Admin antibiotics	Move mom into different position to help relieve the compression	Stop oxytocin Admin terbutaline, anti bio Monitor for hypovolemic shock	Immediat C-section

1

Surgery or Invasive Procedures

Describe the procedure in your own words. IF this applies to your patient.

Procedure

Surgery / Procedures Problem Recognition

To prevent a complication based on the procedure, answer each question in the table below.

Question	Most Likely Maternal	Most Likely Fetal	Worst Possible Maternal	Worst Possible Fetal
Identify the most likely and worst possible complications.				
What interventions can prevent them from developing?				
What clinical data/assessments are needed to identify complications early?				
What nursing interventions will the nurse implement if the anticipated complication develops?				

Pharmacology

Any new drugs ordered during scenario must be added to the sheet before student leaves the simulation center for the day.

Medications	Pharm. Class	Mechanism of Action in OWN WORDS	Common Side Effects	Assessments/nursing responsibilities
Oxytocin	Uterine Stimulant	Stimulates uterine smooth muscle producing contractions	Hypotension, water intox	VS, FHR, contractions (fx, duration)
Meperidine	Opioid agonists	Binds to opiate receptors in the CNS. Alters the perception of and response to pain	Hypotension, Bradycardia, NIV Sedation	BP, pulse, resp, FHR
Promethazine	Phenothia-zines	Blocks the effects of histamine	Confusion, disorient, Sedation, HTN	BP, pulse, RR, NIV.
Cefazolin	1st Gen Cephalosporin	Binds to bacterial cell wall, causing cell death	NIV, diarrhea, rash, phlebitis @IVsite	For allergic reaction, GI

2

STARTING POINT & PLAN OF ACTION - Nursing Management of Care

1. After interpreting clinical data collected, identify the nursing priority goal for your shift and three priority interventions specific for your patient. For each intervention write the rationale and expected outcome.

Nursing Priority	Pain management/Anxiety control		
Goal/Outcome	A safe and successful delivery with no complications		
Priority Intervention(s)		Rationale	Expected Outcome
1. Comfort		1.	1. Pain is controlled
2. Positioning change frequently		2.	2. To assist w/labor to not add unnecessary pain
3. Teach breath patterns		3.	3. To help distract focus from pain/anxieties

EDUCATION PRIORITIES/DISCHARGE PLANNING

1. Identify three priority educational topics that should be included in a teaching plan to prevent complications and prepare this patient for discharge.

Teaching About Illness Care	Rationale	How are you going to teach?
1. PP Postpartum Hemorrhage	1. To prepare pt and prevent complications	1. S/s of hemorrhage
2. Postpartum Infection	2. Keep mom healthy to take care of baby	2. S/s of infection
3. Postpartum Depression	3. Mental health is overlooked, keep mom happy in turns keeps baby safe from harm.	3. Any irritability mood swings, anxiety, deep persistent low mood

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	12.5	Signifies possible infection
Metabolic Panel Labs		
Are there any Labs result that are concerning to the Nurse?		