

IM6 OB Simulation Patient Preparation Worksheet

RECOGNIZE & ANALYZE CLUES

This section is to be completed prior to Sim Day 1:

Student Name: Nick Nguyen
 Patient initials: BGJ Admit Date: _____
 Diagnosis: G 2 P1 AB L M
 EDD: 03 /27 / Gest. Age: 39 weeks
 Blood Type/Rh: 0+ Rubella Status: mother immune GBS status: mother positive
 Obstetrical reason for admission: SROM
 Complication with this or previous pregnancies: _____
 Chronic health conditions: diabetes
 Allergies: NDKA
 Priority Body System(s) to Assess: body temperature and respiratory

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
Diabetes	Infant of diabetic mother could have immature lungs lead to breathing problem, and baby could come out of the mom having hypoglycemia lead to unable to maintain temperature.
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Unable to stabilize temperature. Respiratory distress.	Having hypoglycemia could affect ability to maintain temperature. Respiratory distress could occur because of low body temp.

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.		Cold stress		Neuro damage, death
What interventions can prevent them from developing?		Help baby maintain temperature		help baby maintain body temperature before lead to cold stress
What clinical data/assessments are needed to identify complications early?		Body temperature, shivering, pale extremities. Blood glucose level		Poor feeding, pale extremities, body temp.

What nursing interventions will the nurse implement if the anticipated complication develops?		Put baby skin to skin, place baby under warmer. Dry baby if wet.		Warm the room up, place baby under warmer, swaddle baby
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Surgery or Invasive Procedures

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

Procedure
N/A

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

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	Prevent hypothermia of baby	
Goal/Outcome	Baby temperature maintain above 98.5F	
Priority Intervention(s)	Rationale	Expected Outcome
1. Drying the baby if wet	1. wet skin could make baby lose heat because of evaporation.	1. baby skin free of water and temperature go up.
2. Warming up the room	2. cold environment could affect baby ability to maintain temp.	2. baby temp maintain above 98.5F
3. place baby under warmer	3. baby could lose heat due to multiple factor such as convection evaporation	3. baby temp maintain above 98.5F

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. Assess baby temperature	1. low body temp could lead to cold stress	1. check the baby temperature every 1-2 hours.
2. Monitor blood glucose	3. If baby blood glucose is low, the baby don't have enough energy to maintain body temperature	2. Monitor blood glucose if baby having shakiness, pale extremities and poor feeding.
3. keep baby dry and swaddle	3. baby could lose heat from evaporation.	3. Dry the baby if water got on skin and swaddle baby to maintain temp.

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
RBC	9.7	
HGB	25.8	
HCT	65.9	
Metabolic Panel Labs		
Are there any Labs result that are concerning to the Nurse?		

This Section will be completed at Simulation Lab when you receive your patient's chart prior to the scenario. Do not complete before your scenario.

Current Priority Focused Nursing Assessment							
CV	Resp	Neuro	GI	GU	Skin	VS	Other

Focused OB Assessment						
Time	Contractions	Emotional/ Psyche	Fetal Assessment	Labor Stage/phase	Pain/ Plan	Vaginal exam
	Freq. Dur. Str.		FHR Var. Accel. Decel. TX.			Dil. Eff. Sta. Prest.
	Freq. Dur. Str.		FHR Var. Accel. Decel. TX.			Dil. Eff. Sta. Prest.
	Freq. Dur. Str.		FHR Var. Accel. Decel. TX.			Dil. Eff. Sta. Prest.
	Freq. Dur. Str.		FHR Var. Accel. Decel. TX.			Dil. Eff. Sta. Prest.

EVALUATION of OUTCOMES – to be completed AFTER scenario.

- Which findings have you collected that are most important and need to be noticed as clinically significant?

Most Important Maternal Assessment Findings	Clinical Significance
Most Important Fetal Assessment Findings	Clinical Significance

2. After implementing the plan of care, interpret clinical data at the end of your shift to determine if your patient's condition has improved, has not changed, or has declined.

Most Important Data	Patient Condition		
	Improved	No Change	Declined

3. Has the patient's *overall* status improved, declined, or remained unchanged during your shift? If the patient has not improved, what other interventions must be considered by the nurse?

Overall Status	Additional Interventions to Implement	Expected Outcome

End of shift SBAR to oncoming nurse (the observers for your scenario)

Situation
Background
Assessment
Recommendation

