IM6 OB Simulation Patient Preparation Worksheet

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

Student Name: _Cami Skipper_

Patient initials: _BS_　　　　　　Admit Date: _____
Diagnosis: G _3_ P _2_ AB _1_ L _1_ M _0_
EDD: _unknown_　　　　Gest. Age: _39 weeks_　　　GBS status: _unknown_
Blood Type/Rh: _pending_　　Rubella Status: _pending_
Obstetrical reason for admission: _severe ab pain; contraction q 2-3 min w/ first or this one_
Complication with this or previous pregnancies: _didn't know; no prenatal care w/_
Chronic health conditions: _none_
Allergies: _no known drug allergies_
Priority Body System(s) to Assess: _uterus, cervical, fetal heart monitor_

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
Early labor	contractions are occuring regularly with spontaneous rupture of membranes and cervical dilation.
Fetal/Newborn Implications	**Pathophysiology of Fetal/Newborn Implications**
Fetal Monitoring	Ability to track the wellbeing of the baby along with proper oxygenation. Because there was no prenatal care, baby should be very closely monitored for accelerations, variables, and decels.

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.	Risk for falls	decrease in fetal variability because of contractions	postpartum hemmrohage	umbilical cord prolapse at -1 station
What interventions can prevent them from developing?	call for help when needed	change mom's position to left laying	- meds to stimulate uterine contraction - fundal massage	Remain in bed until stationed at a 0

What clinical data/assessments are needed to identify complications early?	how safley she can get up due to pregnancy	the fetal strip needs to be monitored on a normal basis	-fundal massage -risk post delivery	fundal station assessment
What nursing interventions will the nurse implement if the anticipated complication develops?	provide personaliced pt care	-change maternal position - provide IUR	have meds on hand & administer to observe	hold hand to hold the cord until baby is out of mom via c-section

Surgery or Invasive Procedures

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

Procedure
N/A

Surgery / Procedures Problem Recognition N/A

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
Terbutaline	beta agonist	relaxing & opening airway	- shaking - dizziness - headache	- heart rate - respirations
Meperidine	opioid	treat moderate to severe pain	- agitation - hallucination - N/V	- heart rate - respiratory - hypotension
Promethazine	phenothiazine	allergic reactions, anxiety, nausea	- sedation - confusion - disorientation	assess drowsiness that may effect gait
Penicillin G	antibiotic	kills bacteria by not allowing new cell wall formation	- abd pain - N/V - diarrhea	assess muscle aches and joint pain
Oxytocin	oxytocic hormone	stimulates uterine contractions	- confusion - hives - dizziness	fundal location via fundal massage
Carboprost Tromethamine	prostaglandin	stimulation of smooth muscle	- diarrhea - hot flashes - chills	→ make sure no history of asthma

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	emotional & pt comfort while in labor	
Goal/Outcome	provide pt focused care for best delivery possible	
Priority Intervention(s)	**Rationale**	**Expected Outcome**
1. change positions	1. to provide comfort & "labor down" baby	1. move labor along to make cervical progress
2. provide pain medications	2. provide comfort & rest to mom	2. reduce pain to allow for rest in transition
3. ask how shes doing with this unexpected pregnancy	3. she didn't even know she was pregnant, which can be scary. fill her emotional needs.	3. peace & assurance to mom

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. perineal recovery	1. comfort. ice packs & pads to provide healing and pain relief	1. show & explain options for care and how to take care of hygiene postpartum
2. resources	2. she is coming home with a baby out of nowhere so make sure she has resources to help	2. give pamphlets & information for organizations in the area
3. postpartum hemrohage awareness	3. to prevent further complications.	3. explain clots & what is a normal amount of bleeding. show diagrams.

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	16.5	induced in the stress of pregnancy
Hgb	10.5	greater expansion of plasma volume compared RBC
Hct	31.5	anemia
Metabolic Panel Labs pending		
Are there any Labs result that are concerning to the Nurse?		
N/A waiting on results		