

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 | successful delivery | |
|---|--|--|
| Goal/Outcome | healthy baby + mom | |
| Priority Intervention(s) | Rationale | Expected Outcome |
| 1. Monitor FHR strip + notify provider of cat. II or III issues | 1. to intervene w/ immediate delivery if necessary | 1. baby is delivered before complications cause long term problems |
| 2. Support mom + encourage her through labor | 2. decrease pain perception and prolonged delivery | 2. Decrease risk of postpartum hemorrhage + emotional distress |
| 3. Monitor mom's vitals + notify provider of abnormal | 3. prevent infection + preeclampsia + hemorrhage | 3. Decrease postpartum complications of 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. Encourage mom + baby to attend follow up appts | 1. Due to lack of prenatal care, it's important to monitor and fix any complications + ensure healthy growth | 1. Stress the importance of attending, give reasons why + ensure SW/CM can help w/ transport or other barriers |
| 2. Teach mom to call Dr if heavy bleeding, DVT, UTI, fever, mastitis occur | 2. These could be signs of infection, late hemorrhage or blood clots | 2. Teach S/S of each and what they mean |
| 3. Teach mom to call Dr. if baby has fever, lethargy, skipped feedings, fever vomiting, dehydration | 3. These could be signs + symptoms of infection, failure to thrive | 3. Teach S/S of each and what they might mean |

| Abnormal Relevant Lab Test | Current | Clinical Significance |
|---|-------------|---|
| Complete Blood Count (CBC) Labs | | |
| WBC | 16.5 ↑ | stress of labor |
| Hgb/Hct | 10.5/31.5 ↓ | increase in plasma volume |
| MCHC | 32 ↓ | iron deficiency anemia/↑ plasma volume? |
| Metabolic Panel Labs | | |
| | | |
| | | |
| Are there any Labs result that are concerning to the Nurse? | | |
| NOT at this time | | |

Pending

Surgery or Invasive Procedures -

Describe the procedure in your own words. *If this applies to your patient. If not, leave blank.*

| |
|-----------|
| Procedure |
| N/A |

Surgery / Procedures Problem Recognition *If this applies to your patient complete. If not, leave blank.*
 To prevent a complication based on the procedure, answer each question in the table below.

| Question | N/A | 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 SQ 0.25ml | Bronchodilator | relaxes smooth muscles | dizzy, ↑HR, HTN, vasodilation | get up slowly monitor BP/HR |
| Meperidine IVP 25mg | analgesic | CNS depression | ↓HR/BP, weak, HA, dizzy, resp. arrest, shock | get up slowly monitor BP/RR |
| Promethazine IVP 12.5mg | antiemetic | H1 histamine agonist | drowsy, sedation, blurred vision, dry mouth | may interfere w/ lactation monitor RR |
| Penicillin | antibiotic | binds to bacteria | N/V/D, abd. pain, rash, fever, chills, HA | monitor baby if breastfeeding monitor Temp Abd. assessment |
| Oxytocin | Oxytocics | stimulates uterine contractions | Hypotension, PVCs, ↓HR, uterine rupture, water intoxication | monitor contractions monitor BP/lochia postpartum |
| | | | | |

IM6 OB Simulation Patient Preparation Worksheet

RECOGNIZE & ANALYZE CLUES

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

Student Name: Megan Elliott
 Patient initials: B.S. Admit Date: _____
 Diagnosis: G 3 P 2 ABO L I M O
 EDD: / / unknown Gest. Age: unknown
 Blood Type/Rh: pending Rubella Status: unknown GBS status: unknown
 Obstetrical reason for admission: severe abdominal pain, in labor
 Complication with this or previous pregnancies: no prenatal, baby born 2 wks - died 3 mo
 Chronic health conditions: None
 Allergies: NKA
 Priority Body System(s) to Assess: Respiratory, Cardiac, Fundal height

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 |
|-----------------------------|---|
| Labor | process of mother giving birth to baby and placenta |
| Fetal/Newborn Implications | Pathophysiology of Fetal/Newborn Implications |
| Prematurity | baby born before their body has properly developed completely |

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. | Preeclampsia | LOW Birth Weight | Postpartum Hemorrhage | Stillborn or fetal demise |
| What interventions can prevent them from developing? | monitor BP | labor cessation | massage fundus + monitor V/S, lochia | monitor FHR and strips |
| What clinical data/assessments are needed to identify complications early? | urine dip v/s | US checkups | monitor V/S, lochia, fundus | FHR strips |
| What nursing interventions will the nurse implement if the anticipated complication develops? | Magnesium sulfate @ laying position | NICU team | oxytocin massage fundus | IUR CPR |