

IM6 OB Simulation Patient Preparation Worksheet

RECOGNIZE & ANALYZE CLUES

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

Student Name: Mercedes Alejandro

Patient initials: BJ Admit Date: _____

Diagnosis: G P AB L M

EDD: ____/____/____ Gest. Age: 39 weeks

Blood Type/Rh: _____ Rubella Status: _____ GBS status: _____

Obstetrical reason for admission: Respiratory Distress, Inability to stabilize temperature

Chronic health conditions: _____

Allergies: NKDA

Priority Body System(s) to Assess: Respiratory and Cardiac

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
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Respiratory Distress, Inability to stabilize temperature	Newborn is not able to regulate body temperature and their body is trying to compensate so heart rate increases as well as respiratory rate. Because of this their blood sugar and can lower and start to cause respiratory distress due to lowered surfactant levels.

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.		Fetal grunting, tachypnea and retractions		Bronchopulmonary Dysplasia
What interventions can prevent them from developing?		Supplemental oxygen, positioning		Artificial surfactant replacement Oxygen supplementation
What clinical data/assessments are needed to identify complications early?		Respiratory assessment, PNV		Respiratory assessment, PNV

What nursing interventions will the nurse implement if the anticipated complication develops?		Change position of baby, apply supplemental oxygen		Respiratory support and monitoring, oxygen supplementation
---	--	--	--	--

Surgery or Invasive Procedures -

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

Procedure

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	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
Phytonadione 1mg IM	Vitamin	Vitamin K used to treat deficiency	Flushing, sweating, bruising at injection site	Assess for skin irritation to injection, educate parents and get consent
Erythromycin Ointment 0.5%	Macrolide Antibiotics	Used to treat certain eye infections in newborns by stopping the growth of bacteria	Eye stinging and irritation, temporary blurred vision	Make sure to apply ribbon of ointment to the eyelash line, don't touch the tip of the bottle to the eye
Hepatitis B Vaccine	Vaccine	Protects child against hepatitis b.. it offers long time immunity, is an inactivated vaccine		Assess for skin irritation at injection site, educate parents on risk and benefits and get consent

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	Lower cold stress and help with thermoregulation	
Goal/Outcome	Body temperature increases and respiratory distress lowers and goes away	
Priority Intervention(s)	Rationale	Expected Outcome
1. Swaddle child and apply cap	1. This helps the newborn keep heat and increase the body temperature	1. Body temperature increases
2. Place newborn under radiant warmer	2. Applying external heat will help increase body temperature	2. body temperature increases and respirations lower and pulse
3. place newborn on stomach to help add resistance to help breathing	3. this applies resistance to the lungs and can increase respiratory effectiveness	3. respirations lower and can breathe easier

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. Make sure and dry child quickly after baths	1. Heat loss can happen when they are wet by evaporation	1. educate when they are giving babies first bath
2. Artificial surfactant	2. mimics the natural surfactant that are in the lung and help respirations by helping the lungs expand	2. print additional information and make sure and get a teach back on what it is and does
3. promote skin to skin contact	3. skin to skin contact helps baby regulate temperature without getting too hot	3. Have them practice skin to skin while in the room and educate on benefits

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
RBC	9.7	Trying to increase perfusion
Hgb	25.8	Body needs more oxygen so levels increase
HCT	65.9	High RBCs because the need for oxygen
Metabolic Panel Labs		
Are there any Labs result that are concerning to the Nurse?		
RBC, Hgb, HCT		

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

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

Time:		Focused Postpartum Assessment					
VS	CV	Resp	Neuro	GI	GU/Fundal	Skin	Other
					Bladder Fundal loc Tone Lochia		

Time:		Focused Newborn Assessment					
VS	CV	Resp	Neuro	GI	GU	Skin	Other

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