

IM6 OB Simulation Patient Preparation Worksheet

RECOGNIZE & ANALYZE CLUES

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

Student Name: Christophirs to Tsai
 Patient initials: AS Admit Date: 08/11
 Diagnosis: G 1 P 1 AB L M
 EDD: 12 / 21 / Gest. Age: 28 wk.
 Blood Type/Rh: A+ Rubella Status: Immune GBS status: unknown.
 Obstetrical reason for admission: Severe pregnancy HTN. HA, Nausea, abd pain.
 Complication with this or previous pregnancies: BP 160/112, DTR 3+, C/S due to HTN.
 Chronic health conditions: Anemia
 Allergies: NKA
 Priority Body System(s) to Assess: BP, fundus post C/S, lochia.

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
Severe Pregnancy HTN.	<ul style="list-style-type: none"> Late prenatal care, teen pregnancy ↑ risk of HTN. Fluid retention, unable to void post C/S.
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Preterm, under wt.	<ul style="list-style-type: none"> Under develop.

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.	Gestational HTN	Res distress Jaundice IA	SE ⇒ death.	
What interventions can prevent them from developing?	admin Magnesium sulfate ↓ SE risk.	NICU. monitor.	Prepare Calcium Gluconate in case over correct.	
What clinical data/assessments are needed to identify complications early?	BP, lung sound voiding output		Notify MD if out < 30ml/hr Res < 10/min.	
What nursing interventions will the nurse implement if the anticipated complication develops?	Serum magnesium level. Q4. SE. precaution.			

(padded side rail
oral airway)

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	Control / monitor BP. Pt Safety.	
Goal/Outcome	Prevent SZ. BP back to safe/healthy level. Pt is safe.	
Priority Intervention(s)	Rationale	Expected Outcome
<ol style="list-style-type: none"> 1. Admin Magnesium sulfate 2. SZ precaution 3. Monitor BP / void output Blood serum level. 	<ol style="list-style-type: none"> 1. ↓ SZ risk, ↓ nerve/muscle 2. If SZ happened pt will be safe. 3. To evaluate if the intervention improve pt condition. 	<ol style="list-style-type: none"> 1. HTN won't develop into SZ, stroke. 2. Pt is safe from SZ episode, stroke 3. Nurse can notify MD if pt condition need interventions.

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?
<ol style="list-style-type: none"> 1. Avoid alcohol, caffeine consume less salt 2. Stay active / exercise. 3. HTN signs / crisis Meds teaching. 	<ol style="list-style-type: none"> 1. Diet is a big element contribute to HTN. 2. Active life style can improve HTN, ↓ stroke risk. 3. Pt can tell what signs should be treat seriously and see a health care professional. 	<ol style="list-style-type: none"> 1. What are healthy meal plan looks like. 2. How to make active daily plan. 3. Anxiety, blur vision, HA. N/v. are sign of HTN crisis want to keep BP < 140.

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC ↑	13.5 H.	Maybe sign of infection.
Hgb ↓	10.5 L	Indicate blood loss.
Plt ↓	100 L	Indicate slow blood clot.
Metabolic Panel Labs		
ALT ↑	42	Indicate liver damage
AST ↑	39	Indicate liver damage/disease.
Are there any Labs result that are concerning to the Nurse?		

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
Tylenal	analgesic	Pain reliever, fever reducer.	- Stomach pain - Dark urine.	- Watch skin rash, HA, N/V. - report if S/S worsen.
PNV	Vitamin mineral	Provide vitamin/mineral in pregnancy, postnatal period.	- some may hypersensitive to folic acid.	PT teaching. take with meals.
Fe supplement	iron.	replace iron deficiency	- N/V, dizziness - mild itching.	- PT teaching. - watch for allergic reaction.
Magnesium sulfate.	anticonvulsants	↓ muscle & nerve. lower SE risk.	- diarrhea. - upset stomach	- Watch blood serum level Q4 - Prepare Calcium Gluconate