

# OB Simulation Patient Preparation Worksheet

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

Student Name: phanella Monthe Admit Date: \_\_\_\_\_

Patient initials: SB G 3 P 2 AB L M EDD:     /     /     Gest. Age:    

Blood Type/Rh: pending Rubella Status: unknown/pending

GBS status: unknown

Obstetrical reason for admission: Pregnancy at unknown gestation in labor

Complication with this or previous pregnancies: severe abdominal pain

Chronic health conditions: None

Allergies: NKDA

Priority Body System(s) to Assess: Abdominal, fundus, sterile vaginal exam,

### Pathophysiology

Interpreting clinical data collected, what is the primary/current medical/obstetrical problem?

State the pathophysiology of this problem in your *own* words.

**Complete the medical/obstetrical problem & fetal implications section for any pregnant patient.**

**Complete the medical/obstetrical problem for any postpartum patient.**

**Complete the newborn implications for any newborn infant.**

Medical/Obstetrical Problem	Pathophysiology of Medical/Obstetrical Problem
Labor	Series of continuous and progressive contractions of the uterus that help the cervix dilate and efface to allow the expulsion of the baby
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Fetal station	Describe how far the baby head has descent into pelvis

### Problem Recognition

To prevent a complication based on the primary medical problem, answer each question in the table below.

Question	Most Likely Maternal	Worst Possible Maternal	Most Likely Fetal	Worst Possible Fetal
Identify the most likely and worst possible complications.	High risk for postpartum hemorrhage	Hemorrhage shock	Anemia	Organ failure

What interventions can prevent them from developing?	Massage the fundus	Admit uterotonic medication as prescribed	Iron supplement	Treat severe anemia
What clinical data/assessments are needed to identify complications early?	She is multipara	Blue lips, decrease urine output, hypotension, chest pain	The mom did not know she is pregnant and may be did not take folic acid	Irregular heart beat Development delay Weakness
What nursing interventions will the nurse implement if the anticipated complication develops?	Admit uterotonics med as prescribed	Admit oxygen Admit iv fluid Blood transfusion	Blood transfusion	Blood transfusion Admit oxygen

## Surgery or Invasive Procedures - *If this does not apply to your patient leave blank*

Describe the procedure in your *own* words.

Procedure

## Surgery/Procedures Problem Recognition - *Leave blank if this does not apply*

To prevent a complication based on the procedure, answer each question in the table below.

Question	Most Likely Maternal	Worst Possible Maternal	Most Likely Fetal	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
Mepiridine	opioid	Used to treat pain	Respiratory depression	Assess pain level Respiratory status Monitor s/s of respiratory depression
promethazine	antiemetic	Used for nausea	confusion	Assess patient LOC Assess pain or burning sensation at the IV site
Penicillin G	antibiotic	Prophylactic used to treat infection	Diarrhea	Monitor for s/s of anaphylaxis reaction Assess for allergies
Oxytocin	hormone	Cause uterine muscle contraction	Intense contraction	Assess cervical dilatation and fetal heart rate Decrease or discontinue when appropriate
Terbutaline	Beta-an tagonist tocolytic	Used to treat non reassuring fetal heart rate and tachysystole	tremor	Assess heart rate Monitor for s/s of tremor

## 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		
Goal/Outcome		
Priority Intervention(s)	Rationale	Expected Outcome
1.	1.	1.
2.	2.	2.
3.	3.	3.

Abnormal Relevant Lab Test	Current	Clinical Significance
<b>Complete Blood Count (CBC) Labs</b>		
<b>Metabolic Panel Labs</b>		
<b>Are there any Labs results that are concerning to the Nurse?</b>		

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

**This Section is to be completed in the Sim center- do not complete before!**

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 - Complete this section AFTER scenario.**

1. 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

## Professional Communication - SBAR to Primary NURSE

Situation
<ul style="list-style-type: none"> <li>Name/age</li> <li>G P AB L EDB / / Est. Gest. Wks.:</li> <li>Reason for admission</li> </ul>
Background
<ul style="list-style-type: none"> <li>Primary problem/diagnosis</li> <li>Most important obstetrical history</li> <li>Most important past medical history</li> <li>Most important background data</li> </ul>
Assessment
<ul style="list-style-type: none"> <li>Most important clinical data:                             <ul style="list-style-type: none"> <li>Vital signs</li> <li>Assessment</li> <li>Diagnostics/lab values</li> </ul> </li> <li><i>Trend of most important clinical data (stable - increasing/decreasing)</i></li> <li>Patient/Family birthing plan?</li> <li>How have you advanced the plan of care?</li> <li>Patient response</li> <li>Status (stable/unstable/worsening)</li> </ul>
Recommendation
<ul style="list-style-type: none"> <li>Suggestions for plan of care</li> </ul>

O2 therapy \_\_\_\_\_

IV site \_\_\_\_\_

IV Maintenance \_\_\_\_\_

IV Drips \_\_\_\_\_

Anesthesia Local / Epidural / Spinal / General

Episiotomy \_\_\_\_\_ Treatment \_\_\_\_\_

Incision \_\_\_\_\_ Dressing \_\_\_\_\_

Fundus Location \_\_\_\_\_ Firm / Boggy \_\_\_\_\_

Pain Score \_\_\_\_\_ Treatment \_\_\_\_\_

Fall Risk/Safety \_\_\_\_\_

Diet \_\_\_\_\_

Last Void \_\_\_\_\_ Last BM \_\_\_\_\_

**Notes:**

Intake \_\_\_\_\_ Output: \_\_\_\_\_