

OB Simulation Patient Preparation Worksheet

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

Student Name: Sydney Corbett Admit Date: 4/28
 Patient initials: SR G I P O A B O L O M O EDD: 12/8/1 Gest. Age: 36wks
 Blood Type/Rh: O+ Rubella Status: Immune GBS status: Neg
 Obstetrical reason for admission: Rupture of membranes
 Complication with this or previous pregnancies: breach position
 Chronic health conditions: none
 Allergies: NKA
 Priority Body System(s) to Assess: Resp, Cardiac, + Leopold's

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
SRMOM w/ breach position	ROM followed by contractions + cervical dilation
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Vaginal delivery ↑ risk of newborn death	w/ the head coming out last, the cervix may clamp down on head leading to ↓ O ₂

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.	C-section delivery	hemorrhage	Premature birth	Cord prolapse
What interventions can prevent them from developing?	rotation of fetus?	fundal massage	tocolytics for mom	Fetal heart monitor
What clinical data/assessments are needed to identify complications early?	No anticoags, NSA, NSAIDS	H0 + measure pad	ROM + fetal presentation	vaginal exam

What nursing interventions will the nurse implement if the anticipated complication develops?	abx prior to surgery	Packed RBC	NICU admission	Immediate C-section
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Surgery or Invasive Procedures - *If this does not apply to your patient leave blank*

Describe the procedure in your own words.

Procedure
C-section: Surgeon will cut opening into moms lower abdomen + uterus to deliver baby

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.	↑ risk of C-section in future pregnancy	hemorrhage or infection	tachypnea	RDS
What interventions can prevent them from developing?	transverse cut	Prophylactic abx + fundal massage	vaginal delivery	vaginal delivery or ↑ gestation + time
What clinical data/assessments are needed to identify complications early?	uterine rupture	quantify blood loss + watch V/S + temp	Resp rate + V/S	APGAR score
What nursing interventions will the nurse implement if the anticipated complication develops?	immediate C-section	Packed RBC ↑ IV abx	Supplemental O ₂	O ₂ supplementation

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
Cefazolin	Cephalosporin	binds to penicillin-binding proteins to inhibit peptidoglycan synthesis	diarrhea, nausea, abd cramping	loss + frequent stool allergic reaction

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	Prevent Post partum hemorrhage	
Goal/Outcome	least amount of blood loss possible	
Priority Intervention(s)	Rationale	Expected Outcome
1. massage the fundus	1. ensure uterus contracts efficiently	1. uterine contracts
2. Monitor V/S	2. check for any ↓ in BP or ↑ in HR	2. V/S stay stable
3. quantify blood loss	3. ensure blood loss isn't significant	3. < 1000ml of blood loss

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	15.5 ↑	possible infection
Hgb	11.6 ↓	anemia or blood loss
Hct	35.4 ↓	anemia or blood loss
Metabolic Panel Labs		
Are there any Labs results that are concerning to the Nurse?		

↑ WBC can indicate infection + baby should come out asap

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

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

Focused OB Assessment								
Time:	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.				

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

Focused Newborn Assessment								
Time:	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.