

# Labor & Delivery

Room 14

NAME R. G.  
Age/DOB 4/9/1992 32  
Height/Weight 5'2" 153 lb  
BMI: 27.98  
G3T0P2A0L2  
EDC: 5/1  
Gestational Age: 39

PROVIDER: BLANN

Partner: \_\_\_\_\_

Support Person: \_\_\_\_\_

BLOOD TYPE: A+

A  B  O  AB Rh: + or -  
Rhogam given / (date)

## ADMIT DETAILS

Date/Time: 4/24/24 @ 1000

IV: 18 gage Location L FA

Induction Labor  C/S Augmentation

Cervix Dilation: \_\_\_\_\_

Contraction frequency: \_\_\_\_\_

Membranes: Intact  Ruptured @ \_\_\_\_\_

Color \_\_\_\_\_ Odor \_\_\_\_\_

ALLERGIES: HYDROCONE

MEDS: PNV / Ca<sup>2+</sup> / PEPCID / TYLENOL / GABA

EPIDURAL: \_\_\_\_\_

PERTINENT HX: ANEMIA @ 8 YR  
SPINAL HX C/S X2 AGO

## PRENATAL LABS

GBS:  Negative Positive

Rubella:  Immune Non-immune

Syphilis(RPR):  Negative Positive

HIV:  Negative Positive

UDS:  Negative Positive

FOLEY: d/c @ \_\_\_\_\_ am/pm Void due @ \_\_\_\_\_

## DELIVERY

AROM/SROM @ \_\_\_\_\_ am/pm

Fully Dilated @ \_\_\_\_\_ am/pm

C/S or Vaginal @ 1:00 am/pm

Placenta @ \_\_\_\_\_ am/pm

Type of Laceration: 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> degree

Episiotomy: \_\_\_\_\_

Forceps \_\_\_\_\_ Vacuum \_\_\_\_\_ Bakari \_\_\_\_\_

EBL/QBL \_\_\_\_\_ mL

COMPLICATIONS: Nuchal Cord Meconium

Shoulder Dystocia PP Hemorrhage

## BABY INFORMATION:

Pediatrician: \_\_\_\_\_

Baby Name: \_\_\_\_\_

Breast  Bottle  Both

Fed @ \_\_\_\_\_ am/pm

Weight: \_\_\_\_\_ Length: \_\_\_\_\_

Band ID: \_\_\_\_\_ Sensor: \_\_\_\_\_

### AMB 108: Clinical Thinking Worksheet

<p>Student Name: <b>Davy Gomez</b></p>	<p>Date:</p>
<p>1. Diagnosis: <b>C/S</b></p>	<p>3. Maternal Information:</p> <p>Parity: <b>16 F1</b> Voiding Past Removal: <b>T F 02 RF</b></p> <p>Age: <b>32</b> Race: <b>WT</b> Marital Status: <b>MARRIED</b> V/S: <b>97/47/6, 96, 16</b></p> <p>Allergies: <b>HYDROCODONE</b> EP: <b>10/4/65</b></p> <p>IMP: <b>AUG. 24/23</b> Diet: <b>R</b></p> <p>EDD: <b>5/1</b> Prenatal Care: <b>YES</b> Procedures: <b>C/S XZ</b></p>
<p>2. Delivery Information:</p> <p>Delivery Date and Time: <b>4/24/24</b> if C/S, reason: <b>ZX</b></p> <p>Vaginal/CS: <b>C/S</b> PAST <b>C/S=@RISK</b> FOR UTERINE RUPT.</p> <p>Incision or Lacerations: <b>N/A</b></p> <p>Anesthesia/Analgesia in Labor: <b>SPINAL</b></p> <p>Bill: <b>27.98</b> Quantitative Blood Loss: <b>720</b></p> <p>Gestational Age at Delivery: <b>39</b></p>	<p>4. Lab Values-Maternal:</p> <p>Blood Type and Rh: <b>A+</b> Antibody Screen:</p> <p>If Rh neg, was RhoGAM given at 28-32 weeks: <b>N/A</b></p> <p>Antepartum Testing done during pregnancy:</p> <p>Rubella: <b>(-)</b> VDRL/RPR or Treponema:</p> <p>HIV: <b>(-)</b> Gonorrhea: <b>(-)</b> Chlamydia: <b>(-)</b></p> <p>HBsAg: <b>(-)</b> GBS: <b>(-)</b> PAP:</p> <p>Glucose Screen: <b>3 Hr. GTT:</b></p> <p>H&amp;H on admission: <b>PP H&amp;H:</b></p> <p>Other Labs:</p>
<p>5. Newborn Information:</p> <p>Sex: <b>(M)</b></p> <p>Age at Birth: <b>8/9</b> Birth: <b>8/9</b> 10 min, if needed:</p> <p>Weight: <b>7</b> 1202.00 gms.</p> <p>Length: <b>50.00</b> cms</p> <p>Admitted to NICU: <b>NICU</b></p> <p>Voided: <b>(+)</b> Stooled: <b>(+)</b></p> <p>Newborn Complications/Concerns: <b>N/A</b></p> <p>Method, Frequency &amp; Type of Feeding: <b>BREAST ; 15min Q2-3</b></p>	<p>6. Lab values/Procedures-Newborn:</p> <p>Culture: <b>Blood type: Coombs</b></p> <p>APGAR:</p> <p>1: <b>9</b> 1 min</p> <p>2: <b>9</b> 5 min</p> <p>3: <b>9</b> 10 min</p> <p>4: <b>9</b> 15 min</p> <p>5: <b>9</b> 20 min</p> <p>6: <b>9</b> 25 min</p> <p>7: <b>9</b> 30 min</p> <p>8: <b>9</b> 35 min</p> <p>9: <b>9</b> 40 min</p> <p>10: <b>9</b> 45 min</p> <p>Circumcision: <b>(YES)</b></p>
<p>7. Maternal Significant History, Complications, Concerns:</p> <p><b>ANEMIA B1 SZ 8 YRS AGO</b></p>	<p>8. Other Information:</p>

<p>Student Name: Davy Gomez</p> <p>7. Focused Nursing problem: POST PARTUM HEMORRHAGIE</p>	<p>11. Nursing Interventions related to the Nursing Diagnosis in #7: 1. FUNDUS MASSAGE</p> <p>Evidenced Based Practice: MANUAL MASSAGING OF UTERINE MUSCLE = SWEETED OUT CLOTS + FIRING OF MUSCLE ⇒ BLOOD LOSS</p> <p>2. OXYTOCIN</p> <p>Evidenced Based Practice: ↑ CONTRACTIONS = ↓ BLEEDING</p> <p>3. WEIGH PADS FOR BLOOD LOSS</p> <p>Evidenced Based Practice: GIVES AN ESTIMATE OF BLOOD LOSS QUANTITY</p>	<p>Date:</p> <p>12. Patient Teaching: 1. REPORT FEELING OF 'WETNESS' @ INCISSION / PERI AREA</p> <p>2. REPORT PINK URINE; COULD INDICATE CLOTS</p> <p>3. REPORT UNUSUAL FATIGUE + LIGHT HEADINESS</p>
<p>8. Related to (r/t): MULTI GRAVIDA 2X C/S</p>		
<p>9. As evidenced by (aeb): MULTI GRAVIDA = ↑ RISK FOR HEMORRHAGIE MULTI C/S = ↑ RISK FOR UTERINE RUPTURE</p>		<p>13. Discharge Planning/Community Resources: 1. LACTATION EDU. 2. CAR SEAT EDU. 3. FOLLOW UP</p>
<p>10. Desired patient outcome: - NORMAL B/P - LOCHIA AMOUNT ↓</p>		