OB Simulation Patient Preparation Worksheet

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

Student Name: _Lily Thompson_____ Admit Date: _4·30·24___

Patient initials: _____ G__P__AB__L__M___EDD: _4_/_30_/_24_ Gest. Age:____

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

Obstetrical reason for admission: _Birth_____

Complication with this or previous pregnancies: _——_____

Chronic health conditions:_——_____

Allergies: _NKDA_____

Priority Body System(s) to Assess: _Newborn Assessment_____

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
Fetal/Newborn Implications	**Pathophysiology of Fetal/Newborn Implications**
hypothermia	there is a high surface area to volume ratio resulting in heat loss

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.			hypoglycemia	mortality
What interventions can prevent them from developing?			frequent feedings	incubator / skin to skin temperatures
What clinical data/ assessments are needed to identify complications early?			glucose labs	

What nursing interventions will the nurse implement if the anticipated complication develops?			supplemental feedings	?

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
phytona-dione	vitamin	treats newborns lack of vit. K in blood- results in better clotting	· jaundice · hyper bilirubin-mia	· education · signed consent · give w/i 6 hrs of birth
erythromycin ophthalmic ointment	Antibiotic	Prevent eye inf. by stopping growth of Bacteria	· irritation · discharge · cloudy eyes	· monitor for irritability · monitor for GI issues · monitor for thrush
hep-B vaccine	Antiviral	helps body produce antibodies to fight against hep.B	· soreness · irritability · swelling	· obtain informed consent · if denied → document · educate importance

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	Temperature		
Goal/Outcome	warm up pt		
Priority Intervention(s)	Rationale		Expected Outcome
1. incubator	1. Increase pt temp fast		1. Pt temp becomes stable enough for skin-to-skin
2. Skin to skin	2. Increase temp while pt is bonding with mom		2. Adequate bonding between mom/baby
3. ↑ feedings	3. prevent potential hypoglycemia		3. Pt tolerates feedings well and maintains a stable glucose level

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
RBC	9.7	All 3 indicate increased RBC's which could prevent the blood from clotting, however the sample is cord blood which may not be as telling.
Hgb	25.8	
HCT	65.9	
Metabolic Panel Labs		