

OB Simulation Patient Preparation Worksheet

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

Student Name: Paulina Calzada Admit Date: 09/10/2024
 Patient initials: SR G1 P0 AB0 L0 M0 EDD: 12/08/XX Gest. Age: 36 wks
 Blood Type/Rh: O+ Rubella Status: immune GBS status: negative
 Obstetrical reason for admission: pregnancy at 36 wks, states, "I think my water broke"
 Complication with this or previous pregnancies: breech presentation at 34 weeks
 Chronic health conditions: none
 Allergies: NKDA
 Priority Body System(s) to Assess: cardiac and respiratory

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 ONLY for any postpartum patient.

Complete the newborn implications ONLY for any newborn infant.

Medical/Obstetrical Problem	Pathophysiology of Medical/Obstetrical Problem
Pregnancy at 36 weeks, SROM and contracting	The SROM causes the protective barrier to be lost so there is an increased risk for infection to the fetus (chorioamnionitis).
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Breech presentation	The fetus' bottom is facing the cervix instead of the head. This can cause problems in the baby such as a swollen face and hyperflexion of the legs.

Problem Recognition

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

Question	Most Likely Maternal Complication	Worst Possible Maternal Complication	Most Likely Fetal/ Newborn Complication	Worst Possible Fetal/ Neonatal Complication
Identify the most likely and worst possible complications.	C- section will be needed if breech presentation can't be corrected.	Hemorrhage can occur from the c-section.	Injury trauma from breech presentation.	Lung immaturity from infection.
What interventions can prevent them from developing?	Trying to correct fetus position guided by ultrasound.	Massage the fundus, check vital signs, asses lochia	Correcting the fetal position	Give antibiotics to mother before delivery
What clinical data/assessments are needed to identify complications early?	Assess the position of the fetus through Leopold's maneuver	Blood pressure, heart rate	Head to toe assessment on the newborn	Respiratory assessment

What nursing interventions will the nurse implement if the anticipated complication develops?	Call the dr. for an emergency c section	Massage the fundus and call the dr. give oxytocin	Inform the physician	Stimulate the newborn to breath
---	---	---	----------------------	---------------------------------

Surgery or Invasive Procedures – *LEAVE BLANK if this does not apply to your patient*

Describe the procedure in your *own* words.

Procedure
Cesarean birth is the creation of an incision to the mother's abdomen to deliver the baby through the uterus.

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 Complication	Worst Possible Maternal Complication	Most Likely Fetal/ Newborn Complication	Worst Possible Fetal/ Neonatal Complication
Identify the most likely and worst possible complications.	Infection at the surgical site	Hemorrhage	Injury trauma from breech presentation.	Lung immaturity from infection.
What interventions can prevent them from developing?	Administer prophylactic antibiotics pre-op	Massage the fundus, assess lochia	Correcting the fetal position	Give antibiotics to mother before delivery
What clinical data/assessments are needed to identify complications early?	Temperature, swelling/redness at incision	Blood pressure, heart rate	Head to toe assessment on the newborn	Respiratory assessment
What nursing interventions will the nurse implement if the anticipated complication develops?	Call the dr. to order antibiotics and clean the incision	Massage fundus to prevent further bleeding and call the dr. give oxytocin	Inform the physician	Stimulate the newborn to breath

Pharmacology

New drugs ordered during scenario must be added before student leaves the simulation center for the day.

Medications	Pharm. Class	Mechanism of Action in OWN WORDS	Common Side Effects	Assessments/Nursing Responsibilities
Nature made prenatal multi + DHA	supplement	Supports development of fetus' brain, nervous system, bones and eyes	*consult dr. to avoid any side effects with other meds	Keep out of reach of children to prevent overdose on iron, take one a day with food
Tylenol	Analgesic/ antipyretic	Reduces swelling and fever and targets pain receptors	Rash, dizziness, GI upset	Implement fall precautions, administer as scheduled to ensure efficacy
Sudafed	Antihistamine/ decongestant	Narrows blood vessels to decrease swelling and congestion	N/V, HA, dizziness, trouble sleeping	Implement fall precautions, teach pt, to report dry mouth

Nursing Management of Care

- After interpreting clinical data collected, identify the nursing priority goal for your shift and **three priority interventions specific for your patient's possible complications (listed on page one)**. For each intervention write the rationale and expected outcome.

Nursing Priority	Massage the fundus		
Goal/Outcome	Prevent hemorrhage		
Priority Assessment/Intervention(s)	Rationale	Expected Outcome	
1. Massage the fundus	1. prevents bleeding and hypovolemic shock	1. fundus is firm	
2. Assess lochia	2. lochia can be used to measure normal/abnormal bleeding	2. bleeding less than 1000mls	
3. Monitor v/s	3. v/s can indicate status of mother and if infection is prevent	3. v/s within normal range\	

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	15.5	Slight increase is expected but could lead to preeclampsia
Hgb	11.8	RBC to plasma volume is diluted because of increased blood
Hct	25.4	RBC to plasma volume is diluted because of increased blood
Metabolic Panel Labs		
Are there any Labs results that are concerning to the Nurse?		
WBC		

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

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

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: _____