

OB Simulation Patient Preparation Worksheet

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

Student Name: Bryanna Moreno Admit Date: _____
 Patient initials: CW G 3 P 2 AB O L M O EDD: 8/10/ Gest. Age: 38wks
 Blood Type/Rh: O- Rubella Status: immune GBS status: -
 Obstetrical reason for admission: induction of labor
 Complication with this or previous pregnancies: pre-eclampsia + gestational DM
 Chronic health conditions: HTN, Depression, GI/M
 Allergies: morphine
 Priority Body System(s) to Assess: Cardiovascular, Skin

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
Pre-eclampsia	increased afterload from high vascular resistance cause by impaired placenta
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Placental insufficiency	placenta fails to transfer blood between mom & baby causing hypoxemia & growth restriction

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.	Pre-mature birth	Placental abruption	Fetal growth restriction	Still born
What interventions can prevent them from developing?	We want them to be induced	induced labor	induced labor	induced labor
What clinical data/assessments are needed to identify complications early?	Monitor: BP, protein & albumin, edema, severe HA, epigastric pain		routine monitoring of FHR	
What nursing interventions will the nurse implement if the anticipated complication develops?	emergency C-section		emergency delivery	

KIM

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

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 Complication	Worst Possible Maternal Complication	Most Likely Fetal/ Newborn Complication	Worst Possible Fetal/ Neonatal Complication
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

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
Oxytocin	oxytocin hormones	induce or strengthen contractions	Fetal bradycardia, uterine hypertonicity	STOP if FHR < 110 monitor frequency & intensity of contractions
Meperidine	opiate	treats moderate to severe pain	Respiratory Depression	monitor for resp. depression: ↓RR, ↓O ₂
Promethazine	Sedating ANTI-histamine	-shortens labor -used as antiemetic	Drowsy Fetal Resp. depression	MONITOR FHR STOP if FHR < 110
Humalog Insulin	Fast-acting insulin	↓ blood sugars	↑HR, HA, hypoglycemia	eat food within 15 mins

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's possible complications (listed on page one). For each intervention write the rationale and expected outcome.

Nursing Priority	managing BP, monitoring FHR, assess for seizures	
Goal/Outcome	Successful delivery with a healthy baby + mom	
Priority Assessment/Intervention(s)	Rationale	Expected Outcome
1. ALL VITALS + FHR / left lateral position 2. Assess for edema / elevate legs, compression stockings, ↓ Na ⁺ 3. Monitor BS / Admin insulin based off sliding scale	1. ↑ blood flow 2. Improves blood flow + reduces pressure 3. Mom has GDM, BS should be monitored regularly	1. FHR + mom VS will be stable 2. ↓ swelling 3. Blood sugars are in range

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	18.5 ↑	infection
glucose	148 ↑	gestation DM
Metabolic Panel Labs		
ALT	36 ↑	indicates liver damage
AST	38 ↑	liver damage
Are there any Labs results that are concerning to the Nurse?		
2+ protein		

Current Priority Focused Nursing Assessment							
CV	Resp	Neuro	GI	GU	Skin	VS	Other
✓ BP, HR, O ₂		✓ LOC, HA, blurred vision	✓ epigastric pain		✓ edema	- BP, HR - RR, O ₂ - edema	- FHR