OB Simulation Patient Preparation Worksheet

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

Student Name: Kim Zertuche   Admit Date: 11/5/24

Patient initials: AJ   G 2 P 1 AB __ L 1 M 0 EDD: 3/27/25 Gest. Age: 38.5

Blood Type/Rh: O   Rubella Status: immune   GBS status: positive

Obstetrical reason for admission: early labor

Complication with this or previous pregnancies: none

Chronic health conditions: Asthma

Allergies: PNC

Priority Body System(s) to Assess: OB, cardiovascular, pulmonary

Pathophysiology

Interpreting clinical data collected, what is the primary/current medical/obstetrical problem? early labor

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
early labor	SROM with positive cervical changes and dilation

Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
none	Reassuring signs = moderate variability with acceleration, 140 FHR

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.	infection, tearing	postpartum hemorrhage infection	FHR decelerations	prolapsed cord
What interventions can prevent them from developing?	antibiotics, meds	c-section	positioning	c-section
What clinical data/assessments are needed to identify complications early?	labs, VS	estimated blood loss	fetal heart monitoring	intrauterine resuscitation
What nursing interventions will the nurse implement if the anticipated complication develops?	fundal massage, meds	blood transfusion surgical repair	positioning	FHR

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

Describe the procedure in your *own* words.

Procedure
N/A

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.

N/A

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	hormone	helps stimulate uterine contractions and helps control PP bleeding	Fetal complications	-can induce labor and increase strength and frequency of contractions
Turbutaline	broncho dilator	dilates bronchis to make it easier to breath	tachycardia tremors	-can cause dysrythmias and may affect electrolytes
Meperidine	opiod	Relieves Pain	constipation drowsiness	can cause hypotension, increase fall risk
Promethazine	anti emetic, antihistamine	helps with nausea	drowsiness	Can cause involuntary movements and dysrythmias
Clindamycin	antibiotic	broad spectrum antibiotic	N/V abd pain	can cause a metallic taste in the mouth

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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	Prevent delivery complications	
Goal/Outcome	Safe delivery	
Priority Assessment/Intervention(s)	**Rationale**	**Expected Outcome**
1. cervical changes, VS, vaginal exams → station and effacient	1. continue to monitor mom and baby throughout labor and delivery	1. Safe delivery
2. baby FHR	2. late or prolonged decelerations indicate fetal distress	2. early decelerations
3. pain	3. manage pain throught delivery	3. managable pain

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	12.5	could indicate infection
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**
						to monitor changes in multi systems	