

IM6 Critical Thinking Worksheet
Mom - baby

| | | |
|--|---|---|
| <p>Student Name: Vanessa Uceda</p> | <p>Nursing Intervention #1: ambulate</p> | <p>Date: 11/13/24</p> |
| <p>Priority Nursing Problem: prevent infection</p> | <p>Evidence Based Practice: early ambulation helps restore muscle function, prevent complications, and improve mothers well-being.</p> <p>Nursing Intervention #2: incentive spirometer</p> | <p>Patient Teaching (specific to Nursing Diagnosis):</p> <ol style="list-style-type: none"> 1. OB check up to inspect incision and prevent infection 2. Pain management - take prescribed pain meds as directed - use ice packs or heating pad on incision as needed 3. Eat a balanced diet with fiber-rich foods - drink plenty of fluids |
| <p>Related to (r/t): repeat cesarean delivery</p> <p>As Evidenced by (aeb): incision - swelling, leaking mom - fever, chills, heavy bleeding and ↑ temp.</p> | <p>Evidence Based Practice: prevents lung infection like pneumonia - improves breathing after surgery.</p> <p>Nursing Intervention #3: wound care</p> | <p>Discharge Planning/Community Resources:</p> |
| <p>Desired Patient Outcome (SMART goal): while patient is in the hospital, assisting with techniques to prevent infection of cesarean incision, by discharge patient will be able to distinguish s/s of infection and know what preventative measures to take.</p> | <p>Evidence Based Practice: Regularly changing dressing dressing/keep dry and give proper wound hygiene education</p> | <ol style="list-style-type: none"> 1. Lactation services 2. Attend follow up appointments for mom & baby 3. Attend follow up appointments for mom & baby |

3. Follow healthcare providers specific instructions for post-op care

Student Name:

Date:

| | | |
|---|---|---|
| <p>Situation: Patient Room #: 405 Allergies: <u>nkda</u> Delivery Date & Time: NSVD PC/S <u>RC/S</u> Indication for C/S: QBL: 371 BTL: N/A LMP: 2/8/24 Est. Due Date: 11/18/24 Prenatal Care: <28 wks <input checked="" type="checkbox"/> LPNC _____ Anesthesia: None <u>Epidural</u> Spinal General Duramorph/PCA</p> | <p>VS: Q4hr <u>Q8hr</u> 0800: B/P 128/11 RR 17 O₂ 91 Pulse 60 T 98.6 1200: B/P 124/89 RR 16 O₂ 98 Pulse 80 T 99.1 Diet: <u>general</u> Pain Level: <u>4</u> / 10 Activity:</p> <p>Newborn: <u>Male</u> Female Feeding: <u>Breast</u> Pumping Bottle Formula: Similac Neosure Sensitive Apgar: 1min <u>8</u> 5min <u>9</u> 10min _____ Wt: _____ lbs _____ oz Ht: <u>4</u> inches <u>3.35kg</u> <u>49.5cm</u></p> | <p>MD: Mom- Blann Baby- Andrew</p> <p>Consults: Social Services: _____ Psych: _____ Lactation: <u>11/11</u> <u>11/12</u> Case Mgmt: _____ Nutritional: _____</p> |
| <p>Background: Patient Age: <u>23</u> y/o Gravida: <u>2</u> Para: <u>2</u> Living: <u>2</u> Gestational Age: <u>39</u> weeks <u>4d</u> Hemorrhage Risk: Low <u>Medium</u> High</p> <p>Prenatal Risk Factors/Complications: <u>Hx preeclampsia,</u> <u>gastrectomy sleeve</u></p> <p>NB Complications: _____ _____ _____</p> | <p>Maternal Lab Values: Blood Type & Rh <u>O+</u> Rhogam @ 28 wks: Yes No Rubella: <u>Immune</u> Non-immune RPR: R / NR HbSAG: + / - HIV: + <input checked="" type="radio"/> GBS: + <input checked="" type="radio"/> Treated: _____ X H&H on admission: <u>13.5</u> hgb / <u>37.3</u> hct</p> <p>Newborn Lab Values: Blood Type & Rh <u>O+</u> POC Glucose: _____ Coombs: + <input checked="" type="radio"/> - Q12hr Q24hr AC Glucose: _____ Bilirubin (<u>cb</u>/<u>tsb</u>): <u>1:6</u> CCHD O2 Sat: <u>pass</u> Pre-ductal <u>94</u> % Post-ductal <u>96</u> % Other Labs:</p> | <p>Vaccines/Procedures: Maternal: MMR consent _____ Date given: _____ Tdap: Date given <u>8/15/24</u> Refused Rhogam given PP: Yes <u>No</u></p> <p>Newborn: Hearing Screen: <u>Pass</u> Retest Refer Circumcision: Procedure Date <u>11/12/24</u> <u>Plastibell</u> Gomco Voided <u>Y</u> / N Bath: <u>Yes</u> Refused</p> |

Student Name:

Date:

403 different patient

| | | |
|---|--|---|
| <p>Assessment (Bubblehep): Neuro: <u>WNL</u> Headache Blurred Vision Respiratory: WNL <u>Clear</u> Crackles RR <u>10</u> bpm Cardiac: <u>WNL</u> Murmur B/P <u>108 / 64</u> Pulse <u>79</u> bpm Cap. Refill: <u></= 3 sec</u> >3 sec Psychosocial: Edinburgh Score <u>N/A</u></p> | <p>Breast: Engorgement Flat/Inverted Nipple Uterus: Fundal Ht 2U 1U <u>UU</u> U1 U2 U3 <u>Midline</u> Left Right Lochia: Heavy Mod <u>Light</u> Scant None Odor: Y / <u>N</u> Bladder: Voiding QS <u>Catheter</u> DTV Bowel: Date of Last BM <u>N/A</u> Passing Gas: Y / <u>N</u> Bowel sounds: WNL <u>Hypoactive</u></p> | <p>Episiotomy/Laceration: <u>cesarean delivery</u> WNL Swelling Ecchymosis Incision: <u>WNL</u> Drainage: <u>Y</u> / N Dressing type: Staples <u>Dermabond</u> Steri-strips Hemorrhoids: Yes <u>No</u> Ice Packs <u>Tucks</u> Proctofoam Dermoplast Bonding: <u>Responds to infant cues</u> Needs encouragement</p> |
| <p>Treatments/Procedures: Incentive Spirometry: Y / <u>N</u> PP H&H: <u>N/A</u> hgb <u>N/A</u> hct HTN Orders: <u>N/A</u> Call > 160/110 VSQ4hr Hydralazine protocol Labetolol BID/TID</p> | <p>IV Fluids: Oxytocin LR NS Rate: _____ / Hour IV Site: <u>23</u> gauge Location: <u>right arm</u> Magnesium given: Y / <u>N</u> Dc'd: _____ @ _____ am/ pm</p> | <p>Antibiotics: _____ Frequency: _____ _____ _____</p> |
| <p>Recommendation: continue latching techniques call if needed help to ambulate</p> | | |