

Jordan Colley

IM6 Critical Thinking Worksheet  
without doctors orders

<p>Student Name: Jordan Colley</p> <p>Priority Nursing Problem:</p>	<p>Nursing Intervention #1: Encourage nipple shield</p> <p>Evidence Based Practice: This can allow for the baby to latch much easier with a flat nipple</p>	<p>Date: 12/10/2024</p> <p>Patient Teaching (specific to Nursing Diagnosis): 1. Positions for the baby to breastfeed</p>
<p>Breastfeeding Related to (r/t): Flat and everted nipple</p>	<p>Nursing Intervention #2: Perform breast exam</p> <p>Evidence Based Practice: Assess breasts for any masses, warmth, or tenderness to catch any engorgement or mastitis</p>	<p>2. Feed on each breast for 10 minutes each, no longer than 30 minutes feeding</p> <p>3. How to remove baby safely from breast carefully</p>
<p>As Evidenced by (aeb): Baby gets fussy from not getting enough milk Mom can become engorged from baby not latching nor pumping</p> <p>Desired Patient Outcome (SMART goal): Baby weight</p>	<p>Nursing Intervention #3: Assess baby weight gain</p> <p>Evidence Based Practice: Assess baby's weight gain at least once every 24 hours to know how well they are being fed and if there needs to be an adjustment</p>	<p>Discharge Planning/Community Resources: 1. Start nurse with nipple shield 2. Give info about outpatient lactation services 3. Start nurse with manual pump</p>

Student Name: Jordan Colley

Date:

<p><b>Assessment (Bubblehead):</b></p> <p>Neuro: <input checked="" type="checkbox"/> WNL Headache Blurred Vision</p> <p>Respiratory: <input checked="" type="checkbox"/> WNL <input checked="" type="checkbox"/> Clear Crackles</p> <p>RR <u>19</u> bpm</p> <p>Cardiac: <input checked="" type="checkbox"/> WNL Murmur B/P <u>123/77</u></p> <p>Pulse <u>78</u> bpm</p> <p>Cap. Refill: <input checked="" type="checkbox"/> &lt;= 3 sec &gt;3 sec</p> <p>Psychosocial: Edinburgh Score <u>0</u></p>	<p>Breast: Engorgement <input checked="" type="checkbox"/> Flat/Inverted Nipple</p> <p>Uterus: Fundal Ht 2U 1U <input checked="" type="checkbox"/> UU U1 U2 U3</p> <p>Midline <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right</p> <p>Lochia: Heavy <input checked="" type="checkbox"/> Mod <input checked="" type="checkbox"/> Light <input checked="" type="checkbox"/> Scant <input checked="" type="checkbox"/> None</p> <p>Odor: Y / <input checked="" type="checkbox"/> N</p> <p>Bladder: Voiding <input checked="" type="checkbox"/> QS <input checked="" type="checkbox"/> Catheter <input checked="" type="checkbox"/> DTV</p> <p>Bowel: Date of Last BM <u>MR</u></p> <p>Passing Gas: Y / <input checked="" type="checkbox"/> N</p> <p>Bowel sounds: WNL <input checked="" type="checkbox"/> Hypoactive</p>	<p>Episiotomy/Laceration: <input checked="" type="checkbox"/> NOXISION</p> <p><input checked="" type="checkbox"/> WNL Swelling <input checked="" type="checkbox"/> Ecthymosis</p> <p>Incision: WNL Drainage: Y / N</p> <p>Dressing type: _____</p> <p>Staples <input checked="" type="checkbox"/> Dermabond <input checked="" type="checkbox"/> Steri-strips</p> <p>Hemorrhoids: Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Ice Packs <input checked="" type="checkbox"/> Tucks <input checked="" type="checkbox"/> Proctofoam</p> <p>Dermaplast</p> <p>Bonding: _____</p> <p>Responds to infant cues <input checked="" type="checkbox"/></p> <p>Needs encouragement <input checked="" type="checkbox"/></p>
<p>Treatments/Procedures:</p> <p>Incentive Spirometry: Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>PP H&amp;H: <u>12.9</u> hgb <u>311</u> hct</p> <p>HTN Orders:</p> <p>Call &gt; 160/110 <input checked="" type="checkbox"/> VSQ4hr</p> <p><input checked="" type="checkbox"/> Hydralazine protocol <input checked="" type="checkbox"/> Labetolol BID/TID</p>	<p>IV Fluids: Oxytocin LR NS</p> <p>Rate: _____ / Hour</p> <p>IV Site: _____ gauge Location: _____</p> <p>Magnesium given: Y / N</p> <p>Dc'd: _____ @ _____ am / pm</p>	<p>Antibiotics: _____ Frequency: _____</p>
<p><b>Recommendation:</b></p>		

Student Name: Jordan Colley

Date: ?

<p><b>Situation:</b>          Patient Room #: <u>418</u>          Allergies: <u>NKA</u>          Delivery Date &amp; Time: _____</p>	<p>VS: Q4hr          0800: BP <u>104/103</u> HR <u>75</u> bpm          O<sub>2</sub> <u>98%</u> W <u>10</u>          RR <u>24</u> Pain <u>4/10</u>          1200: _____</p>	<p>MD: <u>Mon - Blach/on-call (Lapsonst) Killeen</u>          Baby- <u>FINIKU</u></p>
<p>Indication for C/S:          QBL: <u>75</u> BTL: <u>patient not</u>          LMP: _____ Est. Due Date: <u>none</u>          Prenatal Care: &lt;28 wks _____ LPNC _____          Anesthesia: <u>None</u> Epidural Spinal          Nitrous General Duramorph/PCA</p>	<p>Diet: <u>Regular</u>          Pain Level: <u>4/10</u> Activity: <u>up as tolerated</u>          Newborn: Male Pumping (Female) Bottle          Feeding: Breast Neosure Sensitive          Formula: Simlac          Appgar: 1min <u>8</u> 5min <u>9</u> 10 min <u>X</u>          Wt: <u>5</u> lbs <u>4</u> oz Ht: <u>20</u> inches</p>	<p>Consults: _____          Social Services: <u>N/A</u>          Psych: <u>N/A</u>          Lactation: <u>12/03/2024</u>          Case Mgmt: <u>12/04/2024</u>          Nutritional: <u>N/A</u></p>
<p><b>Background:</b>          Patient Age: <u>19</u> y/o Living: <u>1</u>          Gravida: <u>1</u> Para: <u>375/1</u> weeks          Gestational Age: <u>37 5/1</u> weeks          Hemorrhage Risk: Low <u>Medium</u> High</p>	<p><b>Maternal Lab Values:</b>          Blood Type &amp; Rh: <u>A+</u>          Rhogham @ 28 wks: Yes <u>NO</u>          Rubella: Immune <u>Non-immune</u>          RPR: R <u>N/A</u> HbsAG: <u>+</u>          HIV: <u>+/0</u> GBS: <u>+/</u> Treated: <u>X</u>          H&amp;H on admission: <u>12.6</u> hgb / <u>31.1</u> hct</p>	<p><b>Vaccines/Procedures:</b>          Maternal: <u>declined</u>          MMR consent _____ Date given: _____          Tdap: Date given <u>N/A</u> Refused          Rhogham given PP: Yes <u>NO</u></p>
<p><b>Prenatal Risk Factors/Complications:</b>  <u>Rubella non-immune</u>  <u>GBS unknown</u>  <u>Abdominal pain</u>          NB Complications: <u>none</u></p>	<p><b>Newborn Lab Values:</b>          Blood Type &amp; Rh: _____          POC Glucose: <u>100</u> Coombs: <u>+/</u>          Q12hr Q24hr AC Glucose: _____          Bilirubin (Tcb/Tsb): <u>0.5</u>          CCHD O2 Sat: _____          Pre-ductal <u>99</u> % Post-ductal <u>98</u> %          Other Labs: _____</p>	<p><b>Newborn:</b>          Hearing Screen: <u>Pass</u> Retest Refer          Circumcision: Procedure Date _____          Plastibell Gomco Voided: <u>Y/N</u>          Bath: <u>Yes</u> Refused</p>