

IM6 Critical Thinking Worksheet

Student Name: Isayas Lopez		Nursing Intervention #1: Physical assessment / discharge assessment		Date: 1/24/15
Priority Nursing Problem: High hemorrhage risk	Evidence Based Practice: directly visualizing skin for pressure pt LOC	Evidence Based Practice: VS	Patient Teaching (specific to Nursing Diagnosis): 1. S/S of blood loss - pale, tachycardia, dizzy, light headed	
Related to (r/t): C-section w/ low transfers and upside down T incision	Evidence Based Practice: Blood loss ↓ BP, ↑ HR, ↑ RR	Nursing Intervention #2: Pain management	2. educate on evaluation with assistance due to previous blood loss, and medications/bedrest	
As Evidenced by (aeb): Blood loss of 2L	Nursing Intervention #3: Pain management	Evidence Based Practice: de pain - de stress and less risk of ↑ RR which could lead to hemorrhage	3. education on PkT guard when how often, how much, effects,	
Desired Patient Outcome (SMART goal): No hemorrhage and controlled pain, begin ambulation w/ assist, late in day or tomorrow	Evidence Based Practice: de pain - de stress and less risk of ↑ RR which could lead to hemorrhage	Discharge Planning/Community Resources:	1. Continue pain meds	
			2. Booklets on post c-section birth for both mom and baby	
			3. ensure voiding and stooling prior to discharge w/ Q4 VS.	

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<p>Situation: Patient Room #: <u>464</u> Allergies: <u>NKDA</u> Delivery Date & Time: <u>1/28 2008</u> NSVD <u>(PC/S)</u> RC/S Indication for C/S: <u>not large baby</u> QBL: <u>2181</u> <u>BFA</u> LMP: <u>Est. Due Date: 1/21/25</u> Prenatal Care: <28 wks <u>LPNC 1/22</u> Anesthesia: None Epidural Spinal</p> <p>Background: Patient Age: <u>36</u> y/o Gravida: <u>3</u> Para: <u>2</u> LIVING: <u>3</u> Gestational Age: <u>39</u> weeks Hemorrhage Risk: Low Medium <u>(High)</u></p> <p>Prenatal Risk Factors/Complications: <u>Large baby, position</u></p> <p>NB Complications: <u>bruising on leg from fall</u></p>	<p>VS: <u>(Q4hr)</u> Q8hr 1200: Diet: Pain Level: <u>2/10</u> Activity: <u>walk w/ assist. on weekends</u> Newborn: <u>(Male)</u> <u>(Rumping)</u> Female Feeding: Breast Formula: Similac Apgar: 1min <u>4/10</u> 5min <u>8/10</u> 10 min Wt: <u>10</u> lbs <u>1.4</u> oz <u>22</u> inches <u>55.9cm</u></p> <p>Maternal Lab Values: Blood Type & Rh <u>A-</u> <u>Alt</u> Rhogam @ 28 wks: Yes <u>(NO)</u> Rubella: <u>(Immune)</u> Non-immune RPR: R <u>(NR)</u> HbsAG: + <u>(-)</u> HIV: + <u>(-)</u> GBS <u>(+)</u> / - Treated: <u>3</u> X H&H on admission: <u>13.9</u> hgb / <u>40.8</u> hct</p> <p>Newborn Lab Values: Blood Type & Rh <u>A-</u> POC Glucose: <u>Coombs: +</u> Q12hr Q24hr AC Glucose: <u>(-)</u> Bilirubin (Tcb/Tsb): <u>(-)</u> CCHD O2 Sat: <u>(-)</u> Pre-ductal <u>(-)</u> % Post-ductal <u>(-)</u> % Other Labs: <u>(-)</u></p>	<p>MD: <u>Century</u> Mom: <u>1/28</u> Baby: <u>Walked</u> Social Services: <u>(-)</u> Consults: <u>(-)</u> Psych: <u>(-)</u> Lactation: <u>1/29</u> Case Mgmt: <u>(-)</u> Nutritional: <u>(-)</u></p> <p>Vaccines/Procedures: Maternal: MMR consent <u>(-)</u> Date given: <u>(-)</u> Tdap: Date given <u>(-)</u> Refused Rhogam given PP: Yes <u>(-)</u> No <u>(-)</u></p> <p>Newborn: Hearing Screen: Pass <u>(-)</u> Retest <u>(-)</u> Refer <u>(-)</u> Circumcision: Procedure Date <u>should be</u> Plastibell Gomco Voided: <u>(-)</u> N <u>(-)</u> Bath: <u>(-)</u> Refused <u>(-)</u></p>
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100 Critical Thinking Worksheet

10/10/2008

Student Name:

Date:

<p>Assessment (Bubblehelp): Neuro: <input checked="" type="radio"/> WNL Headache Blurred Vision Respiratory: <input checked="" type="radio"/> WNL Clear Crackles RR <u>12</u> bpm Cardiac: <input checked="" type="radio"/> WNL Murmur B/P <u>122 / 78</u> (97) Pulse <u>105</u> bpm Cap. Refill: <input checked="" type="radio"/> = 3 sec > 3 sec Psychosocial: Edinburgh Score _____</p>	<p>Breast: Engorgement Flat/Inverted Nipple Uterus: Fundal Ht 2U 1U <input checked="" type="radio"/> U1 U2 U3 Midline Left <input checked="" type="radio"/> Right Lochia: <input checked="" type="radio"/> Heavy <input checked="" type="radio"/> Mod Light Scant None Odor: Y / <input checked="" type="radio"/> N Bladder: Voiding QS <input checked="" type="radio"/> Catheter DTV Bowel: Date of Last BM _____ Passing Gas: <input checked="" type="radio"/> Y / <input checked="" type="radio"/> N Bowel sounds: <input checked="" type="radio"/> WNL Hypoactive</p>	<p>Episiotomy/Laceration: WNL Swelling Ecchymosis Incision: <input checked="" type="radio"/> WNL Drainage: <input checked="" type="radio"/> D / <input checked="" type="radio"/> N Dressing type: <u>Transparenl gauze</u> Staples Dermabond Steri-strips Hemorrhoids: Yes <input checked="" type="radio"/> No Ice Packs Tucks Proctofoam Dermoplast Bonding: Responds to infant cues <input checked="" type="checkbox"/> Needs encouragement <input checked="" type="checkbox"/></p>
<p>Treatments/Procedures: Incentive Spirometry: <input checked="" type="radio"/> Y / <input checked="" type="radio"/> N PP H&H: <u>1.5</u> hgb <u>27.3</u> hct HTN Orders: Call > 160/110 <input checked="" type="radio"/> VSQ4hr Hydralazine protocol Labetolol BID/TID</p>	<p>IV Fluids: Oxytocin <input checked="" type="radio"/> LR <input checked="" type="radio"/> NS Rate: <u>700</u>/Hour <u>celus 1</u> IV Site: <u>18</u> gauge Location: <u>L FA</u> Magnesium given: Y / <input checked="" type="radio"/> N Dc'd: _____ @ _____ am/ pm</p>	<p>Antibiotics: _____ Frequency: _____ _____ _____ _____</p>
<p>Recommendation:</p>		