

NAME: Scottlynn Winn

DATE: 2/4

POST-CLINICAL REFLECTION OB Simulation Reflection - due on Thursday by 2359

To strengthen your clinical judgment skills, reflect on your knowledge and the decisions made caring for this patient by answering the reflection questions below.

Reflection Question	Nurse Reflection
What feelings did you experience in clinical? Why?	I enjoyed this experience. It's always nerve wracking, but I enjoyed having the second nurse that was just there as an extra pair of hands.
What did you already know and do well as you provided patient care?	I felt prepared with what I knew I wanted to do going in. I wanted to draw the labs to see what was going on with baby and I felt that I went in and did exactly what.
What areas do you need to develop/improve?	Improve on knowing who's on the room
What did you learn today?	Definitely learned to always double & triple check who is in the room. Especially if mom is sleeping
How will you apply what was learned to improve patient care?	It will help me keep patients safer in the future.
Please reflect on how your OB simulation learning experience assisted in meeting 2-3 of the Student Learning Outcomes.	1. Safety & Quality: I feel like I did a good job on trying to keep mom w/ baby when she went to the NICU as it was in her birth plan 2. Professionalism: I think I did well when speaking w/ the Drs & trying to advocate for mom while respecting their wishes as well 3.

This Section is to be completed in the Sim center- do not complete before!

Time:		Focused OB Assessment					
VS	Contractions	Vaginal exam	Fetal Assessment	Labor Stage/phase	Pain Plan	Emotional	Other
	Freq. Dur. Str.	Dil. Eff. Sta. Prest. BOW	FHR Var. Accel. Decel. TX.				
Time:		Focused Postpartum Assessment					
VS	CV	Resp	Neuro	GI	GU/Fundal	Skin	Other
					Bladder Fundal loc Tone Lochia		
Time:		Focused Newborn Assessment					
VS	CV	Resp	Neuro	GI	GU	Skin	Other
HR 104 RR 56 OL 93 Temp 97.3		grunting				mottled cyanotic	

EVALUATION of OUTCOMES - Complete this section AFTER scenario.

1. Which findings have you collected that are most important and need to be noticed as clinically significant?

Most Important Maternal Assessment Findings	Clinical Significance
Most Important Fetal Assessment Findings	Clinical Significance
low BG, ↑ WBC's, & cyanosis (mouth & nose)	low BG = can cause all s/s & not good ↑ WBC's = indicative of infection cyanosis = baby is not getting enough O ₂

2. After implementing the plan of care, interpret clinical data at the end of your shift to determine if your patient's condition has improved, has not changed, or has declined.

Most Important Data	Patient Condition		
	Improved	No Change	Declined
Blood glucose	✓		
Grunting & cyanosis	✓		
low temperature	✓ (?)		

3. Has the patient's overall status improved, declined, or remained unchanged during your shift? If the patient has not improved, what other interventions must be considered by the nurse?

Overall Status	Additional Interventions to Implement	Expected Outcome
improved	give abx in NICU	baby's s/s will resolve & go home

Professional Communication - SBAR to Primary NURSE

Situation

- Name/age Baby Girl Jones, 7 day
- G P AB L EDB / / Est. Gest. Wks.: 39 wks
- Reason for admission low BG, TWBC's, & temp instability

Background

- Primary problem/diagnosis high WBC w/ temp instability
- Most important obstetrical history mom GBS+ w/o treatment
- Most important past medical history BF once right after delivery, Apgar 8/9,
- Most important background data @ risk for abduction (high)

Assessment

- Most important clinical data:
 - Vital signs HR 114, RR 56, O₂ 93, T 96.3
 - Assessment grunting, mottled, jittery
 - Diagnostics/lab values WBC 29,000, glucose @ 39 (46 after glucose)
- Trend of most important clinical data (stable - increasing/decreasing) improving
- Patient/Family birthing plan?
- How have you advanced the plan of care? sent to NICU after giving glucose
- Patient response glucose ↑
- Status (stable/unstable/worsening)

Recommendation

- Suggestions for plan of care
Give abx, monitor temp & glucose, d/c to mom @ when ready & ASAP

O2 therapy blow by as needed

IV site Ø

IV Maintenance Ø

IV Drips Ø

Anesthesia Local / Epidural / Spinal / General

Episiotomy Ø Treatment Ø

Incision Ø Dressing Ø

Fundus Location Ø Firm / Boggy

Pain Score Ø Treatment Ø

Fall Risk/Safety high fall risk

Diet Breast milk or formula

Last Void _____ Last BM _____

Intake 10 mL glucose Output: _____
w/tev

Notes:

- mom needs help w/ hotel if she gets 1/c before baby