# OB Simulation Patient Preparation Worksheet
## This section is to be completed prior to Sim Day 1:

Student Name:_____renee hall_____ Admit Date: _____

Patient initials: __BW_____    G___P___AB___L__M___EDD:___/___/___ Gest. Age: 38 3/7 weeks

Blood Type/Rh:_____ Rubella Status: _____ GBS status: _____

Obstetrical reason for admission:_____

Complication with this or previous pregnancies:

Chronic health conditions:_ _____

Allergies: ____NKDA _____

Priority Body System(s) to Assess: _____Temp._____

## Pathophysiology

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

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 |
|---|---|
|  |  |
| Fetal/Newborn Implications | Pathophysiology of Fetal/Newborn Implications |
| Inability to stabilize temperature after delivery |  |

## 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. |  |  | Hypothermia | Respiratory distress syndrome |
| What interventions can prevent them from developing? |  |  | Properly dried off and wrapped Incubator | Close monitoring of vitals |
| What clinical data/assessments are needed to identify complications early? |  |  | Watching for signs such as paleness, lethargy, low body temperature | Watching for: nostril flaring, chest retractions, and skin color changes |

| What nursing interventions will the nurse implement if the anticipated complication develops? | | | Put baby in the incubator and regularly monitor baby's temperatures | Providing oxygen and monitoring O2 sats closely. Giving surfactant |
|---|---|---|---|---|

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

Describe the procedure in your *own* words.

| Procedure |
|---|
|  |

# 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.

| 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 |
|---|---|---|---|---|
| Phytonadione 1 mg IM | Coagulant | Helping with your blood clot | Rash, itching, trouble breathing | Checking vital signs due to blood clots |
| Erythromycin Ophthalmic Ointment 0.5% 1 application to both eyes | Antibiotics | Preventing/treating eye infections | Redness around the eye or swelling | Wash eyes before applying, apply ointment, and close the eye for 30 seconds to let ointment absorb |
| Hepatitis B Vaccine 10 mcg IM | Vaccine | Give antibodies to protect against Hep B | Crying, redness near the injection site, low fever | Give baby first newborn bath then administer the vaccine afterwards (within 12 hours) |
| Sucrose Solution 24% 1 to 2 ml PO | Sugar to help with pain | It helps with pain and gives them comfort |  | Squeeze a little in the infant's mouth or use a gloved finger. |
|  |  |  |  |  |

|  |  |  |  |  |
|---|---|---|---|---|
|  |  |  |  |  |

# 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 | Checking newborns' temperature |
|---|---|
| Goal/Outcome | Getting newborns' temperature stabilized |

| Priority Assessment/Intervention(s) | Rationale | Expected Outcome |
|---|---|---|
| 1. Taking the newborn's temperature | 1. Due to the inability to stabilize temperature on its own | 1. Baby's temperature will be low |
| 2. Incubator if necessary | 3. Baby can't stabilize his temperature on his own. | 2. Baby's temperature will go up |
| 3. Oxygen | 3. If the baby can't keep his oxygen up due to his rapid breathing | 3. Baby oxygen will get better |

| Abnormal Relevant Lab Test | Current | Clinical Significance |
|---|---|---|
| **Complete Blood Count (CBC) Labs** | | |
| WBC | 10.5  H | Indication of infection |
| RBC | 10.6  H | Blood is thick, most likely due to the vitamin K |
| Hgb | 26.5  H | Blood is thick, which might be due to mom's gestational diabetes |
| HCT | 65.4  H | Blood is thick, which could cause trouble with tissue oxygenation |
| Platelet | 270 | |
| **Metabolic Panel Labs** | | |
| | | |
| | | |
| **Are there any Labs results that are concerning to the Nurse?** | | |
| Hgb, HCT | | |

| Current Priority Focused Nursing Assessment | | | | | | | |
|---|---|---|---|---|---|---|---|
| **CV** | **Resp** | **Neuro** | **GI** | **GU** | **Skin** | **VS** | **Other** |

| X | X | | | 5 | | X | |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

| Time: | Focused OB Assessment | | | | | | |
|---|---|---|---|---|---|---|---|
| **VS** | **Contractions** | **Vaginal exam** | **Fetal Assessment** | **Labor Stage/phase** | **Pain Plan** | **Emotional** | **Other** |
| | Freq. <br> Dur. <br> Str. | Dil. <br> Eff. <br> Sta. <br> Prest. <br> BOW | FHR <br> Var. <br> Accel. <br> Decel. <br> TX. | | | | |

| Time: | Focused Postpartum Assessment | | | | | | |
|---|---|---|---|---|---|---|---|
| **VS** | **CV** | **Resp** | **Neuro** | **GI** | **GU/Fundal** | **Skin** | **Other** |
| | | | | | Bladder <br> Fundal loc <br> Tone <br> Lochia | | |

| Time: | Focused Newborn Assessment | | | | | | |
|---|---|---|---|---|---|---|---|
| **VS** | **CV** | **Resp** | **Neuro** | **GI** | **GU** | **Skin** | **Other** |
| | | | | | | | |

## 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** |
| | |

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** |
| | | | |
| | | | |
| | | | |
| | | | |

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 |
|---|---|---|
| | | |

# Professional Communication - SBAR to Primary NURSE

## Situation

- Name/age
- G    P    AB    L          EDB   /   /          Est. Gest. Wks.:
- Reason for admission

## Background

- Primary problem/diagnosis
- Most important obstetrical history
- Most important past medical history
- Most important background data

## Assessment

- Most important clinical data:
  - Vital signs
  - Assessment
  - Diagnostics/lab values
  
  *Trend* of most important clinical data (stable - increasing/decreasing)
- Patient/Family birthing plan?
- How have you advanced the plan of care?
- Patient response
- Status (stable/unstable/worsening)

## Recommendation

- Suggestions for plan of care

O2 therapy _____ ____

IV site_____ _____

IV Maintenance _____ _____

IV Drips _____ _____

Anesthesia  Local / Epidural / Spinal / General

Episiotomy_____Treatment _____ _____

Incision _____Dressing _____ _____

Fundus Location_____ Firm / Boggy_____

Pain Score _____Treatment____ ____ _____

Fall Risk/Safety _____ _____

Diet _____ _____

Last Void_____ Last BM _____ _____

Intake_____ Output:_____ ___

**Notes:**