

OB Simulation Patient Preparation Worksheet

This section is to be completed prior to Sim Day 1:

Student Name: Kaylee Herbert Admit Date: _____
 Patient initials: B S G3P2ABOLM EDD: 1 / 1 Gest. Age: pending
 Blood Type/Rh: pending Rubella Status: pending GBS status: pending
 Obstetrical reason for admission: pregnancy @ unknown gestation in labor
 Complication with this or previous pregnancies: premature delivery previously
 Chronic health conditions: _____
 Allergies: NKDA
 Priority Body System(s) to Assess: abd / vaginal

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
labor @ unknown gestation	labor begun, risk for infection, loss of baby
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
potentially premature	underdeveloped resp system or inability to eat unassisted

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.	hemorrhage cord prolapse	hemorrhage	RDS	fetal demise / failure to thrive
What interventions can prevent them from developing?	maternal position IV fluid	medication IV prophylactic antibiotics	admin corticosteroids before delivery	delay labor prep NICU team
What clinical data/assessments are needed to identify complications early?	vaginal exam FHR monitor	VS CBC vaginal exam	apgar score FHR baby vital signs	FHR monitoring ultrasound
What nursing interventions will the nurse implement if the anticipated complication develops?	start OR C-section	IV replacement Oxycodone fundal massage	transfer to NICU admin O ₂	IUR post delivery resuscitation transfer to NICU

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
meperidine 25mg	phenylpiperide	for acute pain	tachycardia N/V	monitor for resp depression fall risk
promethazine	antihistamine	can control nausea	dry nasal sedation	monitor for tissue irritation at IV site (burning)
penicillin	antibiotic	destroys broad spectrum antibiotics	N/V	monitor for allergic reaction
ketorolac				
celecoxib				

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	Assessment + prep for delivery	
Goal/Outcome	healthy delivery of baby + healthy mom post delivery	
Priority Assessment/Intervention(s)	Rationale	Expected Outcome
1. Gestation?	1. how premature is this baby?	1. if premie → call NICU
2. FHR	2. monitor decels for problems in labor	2. if decel noted, initiate IUR possibly
3. monitor contractions strength + duration	3. progression of labor + monitor for tachysystole	3. contractions regular + progressing

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC ↑	16.5	slightly elevated, possible infections
Hgb + Hct ↓	10.5 + 31.5	slightly low, pregnancy anemia
Metabolic Panel Labs		
Are there any Labs results that are concerning to the Nurse?		
monitor WBC; Hgb + Hct		

Current Priority Focused Nursing Assessment							
CV	Resp	Neuro	GI	GU	Skin	VS ★	Other ★
							station dilation gestation