Outpatient Preparation Worksheet - OB Simulation
This section is to be completed prior to Sim Day 1:

Patient initials: CW						Date of Admission:			
EDD: 8/10	**Gest. Age** 38 2/7 weeks	**G** 3	**P** 2	**T** 3	**PT**	**AB**	**L** 1	**M**	
Blood Type / Rh: O-		**Rubella Status:** immune				**GBS Status:** negative			

Complication with this or Previous Pregnancies:

Hx of preeclampsia, gestational diabetes, PPD

Chronic Health Conditions:

obesity

Allergies:

morphine

Current Medications:

Prenatal vitamins, insulin

Patient Reported Concern Requiring Outpatient Evaluation:

decreased fetal movement

What PRIORITY assessment do you plan based on the patient's reported concern?

FHR monitoring, BIP, SVE

Pharmacology

Review patient home medications and any drug(s) ordered for the outpatient.

Medications	Pharm. Class	Mechanism of Action in OWN WORDS	Common Side Effects	Assessments/Nursing Responsibilities
Prenatal vitamins	vitamin	increase vitamins, nutrients needed for pregnancy	N/V/D, dark stools, constipation	teach pt to take w/ food as well as importance of daily use
acetaminophen	analgesic, antipyretic	changes the way the body senses pain, cools the body	stomach upset	never take more than 4,000 mg/day; assess pain level and/or temp.
novolog	insulin	lowers blood sugar	weight gain, hypoglycemia	monitor glucose levels; correct dosage based on blood sugar level
sudafed	decongestant	constricts blood vessels in the nose	↑HR/BP, restlessness, insomnia	assess HR/BP, drink plenty of water

Pathophysiology

Interpreting clinical data - state the pathophysiology of the reported problem in your own words.
Make sure to include both the maternal and fetal implications

Medical/Obstetrical Problem	Pathophysiology of Medical/Obstetrical Problem
pre-eclampsia, diabetes	HTN and proteinuria during pregnancy; mom's body cannot use insulin effectively
Fetal/Newborn Implications	**Pathophysiology of Fetal/Newborn Implications**
macrosomia; stillbirth	due to mom's hyperglycemia; increased fetal glucose uptake; mom has not felt baby move as much

Problem Recognition

Based on the patient's reported concern, answer each question in the table below.

Question	Most Likely Maternal Complication	Worst Possible Maternal Complication	Most Likely Fetal/ Complication	Worst Possible Fetal/ Complication
Identify the most likely and worst possible complications.	postpartum hemorrhage	hypovolemic shock death?	fetal distress; cord compression	stillbirth
What assessments are needed to identify complications early?	VS, blood loss,	VS, LOC, blood loss	FHR, variability	FHR, variability,
What nursing interventions will the nurse implement if the complication develops?	rub fundus, blood transfusion, O2, oxytocin		amnioinfusion, position changes,	IUR

Nursing Management of Care

Identify the nursing priority after interpreting clinical data collected for this outpatient evaluation.
List three priority nursing assessment/interventions specific to the patient concern. Include a rational and expected outcome for each.

Nursing Priority	monitor baby's HR and movement		
Goal/Outcome	minimal - moderate variability, accelerations & early decels, HR 110-160		
Priority Assessment/Intervention(s)	**Rationale**		**Expected Outcome**
1. place FHR sensor and toco; SVE	1. assess vagina for dilation, effacement, SROM; continuous fetal monitoring		1.
2. monitor fetal HR and variability	2. to determine how baby is doing in utero		2. be able to recognize and intervene cat. II or III
3. position changes or IUR for late or variable decels	3. change maternal position to relieve cord compression; IUR to relieve stress on baby		3. HR back to baseline, no late decels, or variable decels; minimal variability