

Covenant School of Nursing Reflective Practice

Name: Breanne Torres

Instructional Module: 6

Date submitted: 4/2/25

Use this template to complete the Reflective Practice documentation. Use only the space provided. Information that is not visible is lost.

Step 1 Description

I was in the OR with the nursery team awaiting a 38th baby girl getting delivered via c-section. Delivery went smooth for both mom and baby.

Step 4 Analysis

I learned to apply therapeutic communication to comfort the parents. I got to see the nurses apply assessments I've learned.

Step 2 Feelings

At first I was nervous to watch the c-section, but it ended up being a very rewarding experience.

Step 5 Conclusion

I believe the entire situation was handled extremely well. All parts of the healthcare team were supportive and created a safe, welcoming environment.

Step 3 Evaluation

The fact that delivery went well for both mom and baby was good. Towards the end mom did feel nauseous, so she didn't do immediate skin to skin, which upset her.

Step 6 Action Plan

I had a really great experience. Seeing everyone work as a team and getting to sit in on a special moment for another family was very rewarding.

Prioritization Tool

	URGENT	NOT URGENT
IMPORTANT	Urgent & Important DO Make sure baby is safe and healthy	Not Urgent but Important PLAN Give baby vaccines and erythromycin
NOT IMPORTANT	Urgent but Not Important DELEGATE Get warm blankets for mom & baby	Not Urgent and Not Important ELIMINATE Taking photos for parents

Education Topics & Patient Response:

Mom was given education about breastfeeding and she responded very well.

Complete this during your labor and delivery experience and turn it in with your paperwork. Ask your instructor or TPC nurse to check over your findings

Situation:

Date/Time 4/2 0730 Age: 30
 Cervix: Dilation: _____ Effacement: _____ Station: _____
 Membranes: Intact: _____ AROM: _____ SROM: _____ Color: _____
 Medications (type, dose, route, time): _____

I was with nurse
 so I didn't get info
 on mom :)

Epidural (time placed): _____

Background:

Maternal HX: _____
 Gest. Wks: 37 4 Gravida: _____ Para: _____ Living: _____
 GBS status: + 10 Induction / Spontaneous

Assessment (Interpret the FHR strip-pick any moment in time):

Maternal VS: T: _____ P: _____ R: _____ BP: _____
 Contractions: Frequency: _____ Duration: _____
 Fetal Heart Rate: Baseline: _____
 Variable Decels: Early Decels: Accelerations: Late Decels:

Pattern	Example	Cause	Interventions	Desired Outcome
Variable Decelerations		Cord Compression	Discontinue oxytocin Change maternal position Administer oxygen at 10 L/min by nonrebreather face mask. Notify provider Vaginal or speculum examination to assess for cord prolapse. Amnioinfusion Assist with birth if pattern cannot be corrected.	Relieve Cord Compression
Early Decelerations		Head Compression	Continue to monitor labor progress.	Maintain Oxygenation Healthy fetus at delivery
Accelerations		These are OK!	Continue to monitor labor progress.	Maintain Oxygenation Healthy fetus at delivery
Late Decelerations		Poor Placental Perfusion	Discontinue oxytocin Assist woman to lateral (side-lying) position. Administer oxygen Correct maternal hypotension Increase rate of intravenous solution. Palpate uterus to assess for tachystole. Notify provider Consider internal monitoring Assist with birth if pattern cannot be corrected.	Maximize Oxygenation Increased Perfusion to Placenta

Recommendation/Nursing Plan:

Describe the labor process and nursing care given as well as any complications you witnessed:

Describe any Intrauterine Fetal Resuscitation measures utilized and the reason:

Delivery:

Method of Delivery: C-section Operative Assist: W/A Infant Apgar: 9 / 9 QBL: _____
 Infant weight: 7 lbs 1 oz