Hannah Holland

IM6 Student Learning Outcomes				
Safety & Quality	**Clinical Judgment**	**Patient Centered Care**	**Professionalism**	**Communication & Collaboration**
Formulate a plan of care for the childbearing family, and the patient with mental health disorders using evidence-based practice, safety, and quality principles.	*Demonstrate clinical judgment using evidence-based data in making clinical decisions for the childbearing family, and the patient with mental health disorders.*	*Demonstrate family centered care based on the needs of the childbearing family, and the patient with mental health disorders.*	*Relate knowledge, skills, and attitudes required of the professional nurse by advocating and providing care to the childbearing families, and the patient with mental health disorders.*	*Communicate and collaborate effectively with patients, family, and members of the interdisciplinary team in the childbearing family, and the patient with mental health disorders.*

Safety & Quality:

Clinical Judgment:

Patient Centered Care:

Professionalism: My pt was conflicted about whether to have a c-section vs a vaginal birth; and my nurse showed professionalism by giving her all the options with information for each. She gave risks & benefits for each, while emphasizing that its the patients choice & she is there to educate & support her.

Communication & Collaboration:

Covenant School of Nursing Reflective Practice

Name: Hannah Holland Instructional Module: 6 Date submitted: 4/8/25

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

Step 1 Description

My nurse and I entered the patients room this morning, and she & her husband were concerned about her gestational HTN, shoulder dystocia, and c-section vs vaginal delivery. She ended up being educated by my nurse & felt reassured.

Step 2 Feelings

During my nurse giving education, I felt confident because I knew what she was explaining. This is important to me because I felt knowledgable in everything she was talking about.

Step 3 Evaluation

It was good that my pt & her husband got education so it could help relieve some of their anxiety. My nurse, Kailey, did a great job at teaching the pt. Ultimately, the patient made a decision & felt less anxious about it.

Step 4 Analysis

Due to previous lecture, I knew about shoulder dystocia, left laying to help decrease the pts BP, and the risks & benefits of a vaginal delivery versus a c-section. I Also knew about dilation, effacement, & stations, & FHM

Step 5 Conclusion

I have learned that it is so important to educate your patient so they can know what to expect, and it can lower their anxiety.

Step 6 Action Plan

Overall, I had a very great experience in L&D. I will definitely use what I learned in my future practice.

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Prioritization Tool

	URGENT	NOT URGENT
IMPORTANT	Urgent & Important DO monitor BP Q15 - 1hr	Not Urgent but Important PLAN education
NOT IMPORTANT	Urgent but Not Important DELEGATE	Not Urgent and Not Important ELIMINATE

Education Topics & Patient Response: Pt was unsure on vaginal delivery vs c-section. we educated on what the process would be for each, what PP would look like for each, as well as risks/benefits for each. we also educated on how to interpret the monitor.

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 4/8 Age: 32

Cervix: Dilation: 3cm Effacement: 50% Station: -3

Membranes: Intact: ✓ AROM: ____ SROM: ____ Color: ____

Medications (type, dose, route, time): Lexapro Labetalol IVP 0830 Cytotec LR @ 100 mL/hr

Epidural (time placed): N/A

O+ rubella immune

Background:

Maternal HX: Gestational HTN, anxiety

Gest. Wks: 37wk 6 Gravida: 1 Para: 0 Living: 0

GBS status: + / (-)

Induction / Spontaneous

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

Maternal VS: T: ____ P: 91 R: ____ BP: 136/87

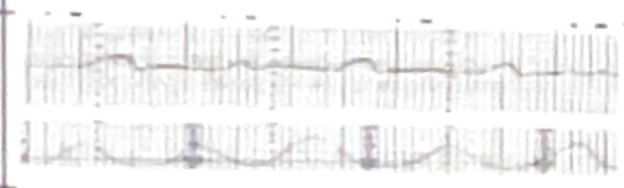
Contractions: Frequency: 5 mins Duration: 45 sec

Fetal Heart Rate: Baseline: 140's

Variable Decels: ( ) Early Decels: ( ) Accelerations: (✓) Late Decels: ( )

accels

minimal variability

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 tachysystole. 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: BP → 160 or > ; 110 or >

Describe any Intrauterine Fetal Resuscitation measures utilized and the reason:

Left laying → to get BP down

Delivery:

Method of Delivery: N/A Operative Assist: ____ Infant Apgar: ___/___ QBL: ____

Infant weight: ____