

OB Simulation Patient Preparation Worksheet

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

Student Name: Alyssa Clements Admit Date: 9/11/xx
 Patient initials: AS (15) G I P L AB I M EDD: 9/11/xx Gest. Age: 20
 Blood Type/Rh: A Rubella Status: Immune GBS status: Unknown
 Obstetrical reason for admission: Emergency C-Section
 Complication with this or previous pregnancies: Pre eclampsia
 Chronic health conditions: N/A
 Allergies: AKBA
 Priority Body System(s) to Assess: Respiratory, Cardiac, Neuro

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
Pre eclampsia	Serious medical condition that develops during pregnancy ↑BP, Proteinuria, damage to other organs (liver + kidneys)
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications

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.	Severe headache vision changes Edema ↑↑↑↑ abdominal pain N/V	Seizures organ failure death		
What interventions can prevent them from developing?	BP monitoring	Magnesium sulfate		
What clinical data/assessments are needed to identify complications early?	BP, HR, RR Neuro	Urinalysis urine output		
What nursing interventions will the nurse implement if the anticipated complication develops?	Antihypertensive	Magnesium sulfate Seizure precautions Monitor DTR Calcium gluconate available		

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
Tylenol	Analgesic	Inhibits the production of prostaglandins which promote pain + inflammation	Stomach pain loss of appetite jaundice	Pain assessment <4,000 mg daily liver function
P/V	Supplement	Vitamins + minerals that support needs of pregnancy	Nausea Constipation Bloating	Diet + Nutrition Side effect monitoring
Fe Supplement	Supplement	Correcting iron deficiency	N/V Constipation Dark tarry stools	Diet + Nutrition Side effect monitoring
Magnesium Sulfate	anticonvulsant	depresses the CNS. ↑GABA + stabilizes neuron membranes	Flushing Drowsiness Hypotension	VS Neuro DT reflexes Mg levels
Calcium gluconate	Supplement	Counteracts excessive magnesium	N/V Tingling Flushing/flushing	VS Calcium levels Cardiac

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	Goal/Outcome	Priority Assessment/Intervention(s)	Rationale	Expected Outcome
	Boozy fundus - Hemorrhage			
	Uterus contracts, bleeding stops			
1. Massage the fundus			1. Stimulates uterus to contract	1. Uterus contracts, bleeding stops
2. V/S			2. >100 bpm ↑ Respiration ↓ BP ~ blood loss	2. V/S remain stable
3. Magnesium sulfate levels			3. Toxicity Relaxes smooth muscles, ↑ risk for bleeding	3. No toxicity, No Seizures, No ↑ in bleeding

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	13.5 ↑	indication of infection
RBC	4.0 ↓	indication of anemia
Platelets	100 ↓	Clot formation
Metabolic Panel Labs		
Are there any Labs results that are concerning to the Nurse?		
RBC + Platelets		

Current Priority Focused Nursing Assessment							
CV	Resp	Neuro	GI	GU	Skin	VS	Other
	lung sound			Out Put		Resp BP HR	OB- fundus U/O