

OB Simulation Patient Preparation Worksheet

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

Student Name: Jan Ferguson Admit Date: _____

Patient initials: CW G 3 P 2 AB 0 L 1 M 0 EDD: 8/10/XX Gest. Age: 38 3/4
 Blood Type/Rh: O- Rubella Status: Immune GBS status: Negative
 Obstetrical reason for admission: Induction
 Complication with this or previous pregnancies: FD, Pre-eclampsy, GDM #1 & #2
 Chronic health conditions: _____
 Allergies: Morphine
 Priority Body System(s) to Assess: Cardiovascular

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
<u>Pre-eclampsia</u>	<u>ABP can cause a ↓ in O₂/Nutrients to fetus as well as placental abruption as well as lead to eclamptic seizures</u>
<u>Fetal/Newborn Implications</u>	<u>Pathophysiology of Fetal/Newborn Implications</u>
<u>Fetal demise/stress</u>	<u>lack of O₂/Nutrients to fetus result in stillbirth or emergent C-Section</u>

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.	Advancement of pre-eclampsia	Placental abruption	Fetal stress	Stillbirth
What interventions can prevent them from developing?	Monitor BP + Urine for protein	Manage stress Monitor for rush of blood del rest	Stress Free environment FHM	Monitor FHM listen to mom
What clinical data/assessments are needed to identify complications early?	An elevation in BP or protein	FHM + in Maternal BI	FHM for decels	Monitor FHM
What nursing interventions will the nurse implement if the anticipated complication develops?	Notify MD	NICU ready Deliver	IUR Notify MD	Notify MD Deliver

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
Oxytocin	Oxytocin	Induce labor with contractions	HR, N/V	Monitor contractions & FHR
Meperidine	Opioid	Treat & manage pain	drowsiness Nausea, Res ↓	Monitor RR, HR Fall precautions
Promethazine	Antihistamine	Allergy treatment	drowsy, dizzy	Fall precautions
Humalog	INSULIN	Manage BGL	Hypoglycemia	Monitor BGL

Nursing Management of Care

- 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	Monitor Maternal VS, Monitor FHR/contractions	
Goal/Outcome		
Priority Assessment/Intervention(s)	Rationale	Expected Outcome
1. Maternal VS	1. Watch for ↑ in BP to prevent further progression of pre-eclampsia	1. Maintain Normal BP preventing complications prevent abortion
2. Monitor FHR	2. Monitor how baby is tolerating labor	2. Prevent complications and have safe delivery
3. Monitor for Abruption	3. Prevent baby from becoming in danger	3. Delivery goes good

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
WBC	18.5	Infection possible
Metabolic Panel Labs		
Glucose	148	can cause baby to be hyperglycemic
ALT/AST	36/38	
Are there any Labs results that are concerning to the Nurse?		

Current Priority Focused Nursing Assessment							
CV	Resp	Neuro	GI	GU	Skin	VS	Other