

Situation:

Date/Time 4/30/25 Age: 24
Cervix: Dilation: 4 Effacement: 60% Station: -3
Membranes: Intact: AROM: SROM: Color: clear
Medications (type, dose, route, time):
Misoprostol 50mcg PO q4hrs PRN
Epidural (time placed): 1146

Background:

Maternal HX: Bipolar
Gest. Wks: 40 Gravida: 2 Para: 1 Living: 1 (Induction)/ Spontaneous
GBS status: + 1(-)

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

Maternal VS: T: 97.6 P: 66 R: 16 BP: 121/75
Contractions: Frequency: 2.5-3 Duration: 70-120
Fetal Heart Rate: Baseline: 130
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 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:

Administration of misoprostol, observed cervical exam, ROM, FSE, IUPC, epidural, catheter placed

Describe any Intrauterine Fetal Resuscitation measures utilized and the reason:

NA

Delivery:

Method of Delivery: Vag Operative Assist: Infant Apgar: / QBL:
Infant weight:

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.