

Student Name: _____

Alexis Glass

Outpatient Preparation Worksheet - OB Simulation

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

| | | | | | | | | |
|---|-----------|------------------------|--------|--------------------|---------------|----|--------|---|
| Patient initials: AJ | | | | Date of Admission: | | | | |
| EDD: 3/27 | Gest. Age | G 2 | P 1 | T | PT | AB | L 1 | M |
| Blood Type / Rh: O+ | | Rubella Status: immune | | | GBS Status: + | | | |
| Complication with this or Previous Pregnancies: GBS + | | | | | | | | |
| Chronic Health Conditions: Asthma | | | | | | | | |
| Allergies: Penicillin, Morphine | | | | | | | | |
| Current Medications: PNV-Nature Made Prenatal Multi + DHA, Acetaminophen, Ibuprofen, Singular, Advair MDI, Proventil MDI | | | | | | | | |
| Patient Reported Concern Requiring Outpatient Evaluation: Early labor, contracting every 10 mins. | | | | | | | | |
| What PRIORITY assessment do you plan based on the patient's reported concern? FHR, VS, cervical exam | | | | | | | | |

Pharmacology

Review patient home medications and any drug(s) ordered for the outpatient.

| Medications | Pharm. Class | Mechanism of Action in OWN WORDS | Common Side Effects | Assessments/Nursing Responsibilities |
|-------------------|--|--|-------------------------|--|
| Advair MDI | Corticosteroid | reduce airway inflammation | Thrush Voice changes | Monitor lung sounds, rate & resp Advise pt to rinse mouth with water after each use |
| Proventil MDI | Short-acting Beta-2 Adrenergic agonist | Bronchodilator | Tachycardia tremors | Teach pt to use for rescue use Monitor lungs, O2 saturation, BPM |
| Singular | Leukotriene Receptor Antagonist | Blocks airway inflammation, bronchoconstriction, and mucus production | Headache fatigue | Monitor resp status Advise pt to continue using even when symptoms are controlled |
| Prenatal vitamins | multivitamin | Supports maternal nutrition needs during pregnancy and lactation | Constipation nausea | Increase fluids/fiber to prevent constipation Teach importance of daily use to help prevent NTD's |

Pathophysiology

Interpreting clinical data - state the pathophysiology of the reported problem in your own words.

Make sure to include both the maternal and fetal implications

| Medical/Obstetrical Problem | Pathophysiology of Medical/Obstetrical Problem |
|--|---|
| Early labor at 38 weeks 5 days GBS + & possible mild preeclampsia | Uterus is contracting at regular intervals & 3cm dilated & 75% effaced, indicates progressive cervical ripening; |
| Fetal/Newborn Implications | Pathophysiology of Fetal/Newborn Implications |
| Potential risk for fetal hypoxia & reduced uteroplacental blood flow Neonatal GBS infection | Considering the mothers increasing BP & protein in urine, this could impair the oxygen & nutrient delivery to the fetus due to vasoconstriction |

Problem Recognition

Based on the patient's reported concern, answer each question in the table below.

| Question | Most Likely Maternal Complication | Worst Possible Maternal Complication | Most Likely Fetal/Complication | Worst Possible Fetal/Complication |
|---|--|---|---|--|
| Identify the most likely and worst possible complications. | Prolonged labor Maternal fatigue | Progression to preeclampsia | GBS transmission | Fetal hypoxia, sepsis, reduced placental perfusion |
| What assessments are needed to identify complications early? | Monitor contractions & cervical changes; check BP & urine for protein | Continuous fetal monitoring & constant monitoring of BP & urine | Monitor FHR for Decelerations, tachycardia or s/s of distress | Newborn assessment Blood cultures |
| What nursing interventions will the nurse implement if the complication develops? | Comfort measures Encourage position changes IV abx Monitor VS & urine | IV abx Notify HCP for ↑ BP | ABX, document | Continuous monitoring, possible NICU admission |

Nursing Management of Care

Identify the nursing priority after interpreting clinical data collected for this outpatient evaluation.

List three priority nursing assessment/interventions specific to the patient concern. Include a rational and expected outcome for each.

| Nursing Priority | Monitor for signs of preeclampsia | | |
|---|---|---|--|
| Goal/Outcome | Detect and prevent worsening maternal hypertension or complications | | |
| Priority Assessment/Intervention(s) | Rationale | Expected Outcome | |
| 1. Assess BP every 1–2 hours | 1.early identification of developing preeclampsia or worse | 1. BP remains stable | |
| 2. Evaluate urine for protein | 2. early identification of a worsening hypertensive crisis | 2. no protein detected in urine | |
| 3. Monitor for headache, visual changes, RUQ pain | 3. monitor for prodromal s/s of preeclampsia | 3. preeclampsia does not develop & baby is delivered safely | |

Student Name: _____

Alexis Glass

Additional Nurses Notes:

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

Procedure Notes:

Circle Procedure Performed: **Amino** **BPP** **NST** **CST** **US** **Labor Eval**
SROM Eval. **Version**

Documentation for Invasive Procedure:

V/S prior to procedure @ _____ T _____ B/P _____ P _____ R _____ FHR _____

Consent (if required) verified prior to procedure **Yes** **No**

Provider arrived @ _____

Timeout @ _____ prior to procedure by _____ MD
_____ RN

Procedure started @ _____

Procedure performed by _____ MD

Ultrasound by provided confirm:

1. Amniotic pocket - Amniotic fluid _____ ml obtained by provider specimen sent to lab @ _____
2. Fetal position
 - o Position _____ verified prior to version @ _____
 - o Position _____ verified after version @ _____

Additional Notes is needed:

Procedure ended @ _____
_____ RN

Nurses Signature:

Student Name: _____

Alexis Glass

Professional Communication - SBAR to Primary NURSE

| |
|---|
| Situation |
| <ul style="list-style-type: none"> Name/age G P T PT AB L M EDB / / Est. Gest. Wks. : Reason for admission |
| Background |
| <ul style="list-style-type: none"> Primary problem/diagnosis Most important obstetrical history Most important past medical history Most important background data |
| Assessment |
| <ul style="list-style-type: none"> Most important clinical data: <ul style="list-style-type: none"> Vital signs Assessment Diagnostics/lab values <i>Trend</i> of most important clinical data (stable - increasing/decreasing) Patient/Family birthing plan? How have you advanced the plan of care? Patient response Status (stable/unstable/worsening) |
| Recommendation |
| <ul style="list-style-type: none"> Suggestions for plan of care |

O2 therapy _____

IV site _____ IV Maintenance _____

Pain Score _____ Treatment _____

Medications Given _____

Fall Risk/Safety _____

Diet _____

Last Void _____ Last BM _____

Intake _____ Output: _____

Notes: