

Student Name Juliana Adams
Pogoy

Nursing Intervention #1:

Date Sep 3, 2025

Assess lochia

Priority Nursing Problem:

Infection

Evidence Based Practice:

Assessing lochia helps determine with complications such as infection.

Patient Teaching (specific to Nursing Diagnosis):

1. Teach pt to change pads every 1-2 hrs. Use proper hygiene before and after changing pads.

Nursing Intervention #2:

Educate pt to change pads every 1-2 hrs

2. Teach pt proper perineal hygiene such as wiping from front to back, using a peri bottle w/ warm water after urinating and bowel movement.

Related to (r/t):

C-section incision site

Evidence Based Practice:

Changing of pads prevent growth of bacteria and lowers risk of infection

3. Teach pt s/s of infection such as foul smelling lochia, increase in bleeding, and incision that has redness, swelling, or drainage

As Evidenced by (aeb):

Presence of lochia on pads without changing

Nursing Intervention #3:

Assess incision site for signs of infection

Evidence Based Practice:

Discharge Planning/Community Resources:

Student Name: _____

Date: _____

Desired Patient Outcome (SMART goal):

Patient will have no infection related to c-section with stable temp and clean, dry, intact incision site by discharge.

Constant assessment of incision site helps detect infection early

1. Teach pt proper incision care such as keeping it clean and dry.
2. Wash with warm water & mild soap. Avoid heavy lifting & strenuous lifting activity.
3. Eat a balanced diet and drink 8-10 glasses of water a day.

Situation:

Patient Room #: 403
Allergies: NKDA

Delivery Date & Time: 9/21/25, 11:20

NSVD PC/S **RC/S**

Indication for C/S: Declined an attempted trial of labor

QBL: 10:32 BTL: _____
LMP: 12/11/24 Est. Due Date: 9/20/25

Prenatal Care: <28 wks LPNC

Anesthesia: None Epidural
Spinal

General
Duramorph/PCA

VS: **Q4hr** Q8hr
 0800: 36.8C 104/65 BP 96 O2
 72 HR MAP 78 0 pain
 15 RR
 1200: 36.8C 97/46 BP 96 O2
 78 HR 65 MAP 0 pain
 17 RR
 Diet: Regular
 Pain Level: 0/10 Activity: Ambulatory

Newborn: **Male** Female
 Feeding: **Breast** Pumping
 Bottle
 Formula: Similac Neosure
 Sensitive
 Apgar: 1min 9 5min 9 10 min
 Wt: ~~41~~ 9 lbs ~~10~~ 7 oz Ht: 20 1/4 inches

MD:
Mom- David Wayne Blann
Baby- Vanessa Dalton

Consults: N/A
Social
Services: _____

Psych: _____

Lactation: _____

Case Mgmt: _____

Nutritional: _____

4/60g

Student Name: _____

Date: _____

Background:

Patient Age: 24 y/o
Gravida: 4 Para: 2
Living: 2
Gestational Age: 37 weeks
Hemorrhage Risk: Low (Medium)
High

Prenatal Risk Factors/Complications:

prior C-section, gestational diabetes

NB Complications:

Diaphoretic / clammy at transition

Maternal Lab Values:

Blood Type & Rh O+
Rhogam @ 28 wks: Yes (No)
Rubella: (Immune) Non-immune
RPR: R / (NR) HbSAG: + / (-)
HIV: + / (-) GBS: + / (-) Treated: X
H&H on admission: 11.6 hgb / 34.1 hct

Newborn Lab Values:

Blood Type & Rh O+
POC Glucose: _____ Coombs: + / (-)
(12hr) Q24hr AC Glucose 36 40 10
47 164
Bilirubin (Tcb/Tsb): _____
CCHD O2 Sat: N/A
Pre-ductal _____% Post-ductal _____%
Other Labs: _____

Vaccines/Procedures:

Maternal:
MMR consent _____ Date given: _____
Tdap: Date given _____
Refused
Rhogam given PP: Yes (No)

Newborn:

Hearing Screen: Pass Retest
Refer
Circumcision: Procedure Date _____
Plastibell Gomco Voided: Y / (N)
Bath: Yes Refused

Student Name: _____

Date: _____

<p>Assessment (Bubblehep):</p> <p>Neuro: <u>WNL</u> Headache Blurred Vision</p> <p>Respiratory: <u>WNL</u> Clear Crackles RR <u>17</u> bpm</p> <p>Cardiac: <u>WNL</u> Murmur B/P <u>99 / 46</u> Pulse <u>76</u> bpm</p> <p>Cap. Refill: <u></= 3 sec</u> >3 sec</p> <p>Psychosocial: Edinburgh Score _____</p>	<p>Breast: Engorgement <u>Flat/Inverted</u> Nipple</p> <p>Uterus: Fundal Ht 2U 1U <u>UU</u> U1 U2 U3 <u>Midline</u> Left Right</p> <p>Lochia: Heavy Mod Light <u>Scant</u> None</p> <p>Odor: <u>Y</u> / N</p> <p>Bladder: Voiding QS <u>Catheter</u> DTV</p> <p>Bowel: Date of Last BM _____ Passing Gas: <u>Y</u> / N Bowel sounds: WNL <u>Hypoactive</u></p>	<p>Episiotomy/Laceration: WNL Swelling Ecchymosis Incision: <u>WNL</u> Drainage: Y / <u>N</u> Dressing type: <u>PILD</u> Staples Dermabond Steri-strips</p> <p>Hemorrhoids: Yes <u>No</u> Ice Packs Tucks Proctofoam Dermaplast</p> <p>Bonding: <u>Responds to infant cues</u> Needs encouragement</p>
<p>Treatments/Procedures: Incentive Spirometry: Y / <u>N</u> PP H&H: <u>11.6</u> hgb <u>34.1</u> hct</p> <p>HTN Orders: Call > 160/110 VSQ4hr</p> <p>Hydralazine protocol Labetolol BID/ TID</p>	<p>IV Fluids: Oxytocin LR NS Rate: _____ / Hour</p> <p>IV Site: <u>16</u> gauge Location: <u>Anterior wrist</u></p> <p>Magnesium given: Y / N Dc'd: _____ @ _____ am/ pm</p>	<p>Antibiotics: _____ Frequency: _____ _____ _____</p>

Student Name:

Date:

Recommendation:		
Ambulate pt educate about changing pads and how often.		