

Covenant School of Nursing Reflective Practice

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Instructional Module: IM6
Labor & Delivery

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<p>Step 1 Description</p> <p>I did my L&D rotation on Tuesday. We met in the lobby and went up together. Amber and I were the only students on the floor. My nurse was amazing and so helpful throughout the day! Hopefully someone was about to be born!</p>	<p>Step 4 Analysis</p> <p>I was able to successfully perform a cervical exam because I asked a lot of questions about it. If I didn't know what I was doing, I could have potentially caused injury to the infants head or even to mom.</p> <p>My patient told us that this was such a different birthing experience than her first one and continued to express gratitude for how we made it special for her.</p>
<p>Step 2 Feelings</p> <p>I woke up and honestly, I was not sure what to expect. I was nervous about it all; doing a cervical exam, a urinary catheter, basically anything I haven't done before on a live person. I was hoping I would get to be a part of someone's journey. At the end of the day, it was an AMAZING day!</p>	<p>Step 5 Conclusion</p> <p>Babies are born fast. That baby came out so fast and I could only take so many pictures {thank you to the resident in my way} that when I realized it is 2025 and I can take a video, the baby was born! So, they didn't get the actual birth on video but they did get his first cry which was very special because you can never get that moment back.</p>
<p>Step 3 Evaluation</p> <p>The best part of the day was getting to care for a mom during one of the most difficult things she's going to do. I didn't place a urinary catheter but I sure did get to do a cervical exam with my own hand! We put her at 7.5cm 100% +1, there was a baby there! Delivery was quick, baby only needed a few strong pushes from mom; mom did so great! I also took some pictures and a video of the birth so the patient could have her mom by her side, that was special.</p>	<p>Step 6 Action Plan</p> <p>Labor and delivery was overall a very good experience for me. I was blessed to learn from a nurse who was passionate for people. It made me happy to see the passion she had for her patient and the efforts she puts in to ensure her patient has the best birthing experience she can.</p>

Prioritization Tool

	URGENT	NOT URGENT
IMPORTANT	<p>Urgent & Important DO</p> <p>Treat patient's symptomatic hypotension -NS bolus -MONITOR BABY TOO</p>	<p>Not Urgent but Important PLAN</p> <p>Monitor fetal HR, fetal strips for any variables, following SR0M with suspected meconium.</p>
NOT IMPORTANT	<p>Urgent but Not Important DELEGATE</p> <p>Tie the sterile gowns of the doctor, resident, etc.</p> <p>Dumping items onto sterile field during sterile prepping of the labor cart.</p>	<p>Not Urgent and Not Important ELIMINATE</p> <p>Took pictures/video of the birth for family.</p> <p>Get mom more apple juice.</p>

Education Topics & Patient Response:

IUPC: the RN explained to the patient that it was a little tube that goes around baby to monitor contractions more closely. Patient was receptive of the information and even wanted to see it right before it was placed.

We explained how important it is to reposition throughout labor to help baby move down and hopefully allow your body to progress and have a strong labor. Our goal was to try and avoid needing medications or a c-section, or any trauma to 'the area'.

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

Situation:

Date/Time 09/10 0551 Age: 22
 Cervix: Dilatation: 6 Effacement: 80% Station: 0
 Membranes: Intact: AROM: _____ SROM: _____ Color: _____
 Medications (type, dose, route, time): _____
 Epidural (time placed): 0715

0815: SROM - witnessed (yellow, light brown)
 0834: I performed the cervical exam!
 8 cm dilated
 100 % effaced
 -1 station

Background:

Maternal HX: GHTN, migraines
 Gest. Wks: 40w 5d Gravida: 2 Para: 1 Living: 1 Induction / Spontaneous
 GBS status: + / -

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

Maternal VS: T: 97.1 P: 70 R: 14 BP: 106/67
 Contractions: Frequency: 2-3 minutes Duration: 40-60 seconds
 Fetal Heart Rate: Baseline: 145 bpm
 Variability: Absent: _____ Minimal: _____ Moderate: Marked: _____
 Type of Variables: Early Decels: Variable Decels: _____ Accels: _____ Late Decels: _____
 Category: I (I, II, III)

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 tachystole. 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: WILD. The labor process was smooth, mom reported it was beautiful compared to her first! No major complications but we did provide treatment for symptomatic hypotension. Shortly following placement of the epidural, mom reports she felt cold, dizzy, and faint. BP was 88 systolic with no significant rise in HR; about 300 mL of NS and 5 mg ephedrine fixed the problem. Baby did fine throughout! Baby boy was born with no issues and successfully latched shortly after delivery!

Describe any Intrauterine Fetal Resuscitation measures utilized and the reason:

NO IUR needed for baby! ❤️

Delivery:

Method of Delivery: vaginal Operative Assist: None Infant Apgar: 8 / 8 QBL: 231 mL
 Infant weight: 4lb 9oz