

OB Simulation Patient Preparation Worksheet

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

Student Name: CAYCE Britton Admit Date: 9/16/25
 Patient initials: Jones G P AB L M EDD: 1/1 Gest. Age: 39
 Blood Type/Rh: _____ Rubella Status: _____ GBS status: Positive
 Obstetrical reason for admission: _____
 Complication with this or previous pregnancies: _____
 Chronic health conditions: _____
 Allergies: NKA
 Priority Body System(s) to Assess: Respiratory, nervous system.

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 X	Pathophysiology of Medical/Obstetrical Problem
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Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Hypoglycemia GBS Positive MOM, un tx	1. Baby was dependent on mom, and is now independent 2. Possible sepsis due to mom not being treated

## 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.	~~~~~	~~~~~	Hypoglycemia	sepsis Resp Distress
What interventions can prevent them from developing?			Heel stick, give glucose	Blood culture & observe 48 hrs O2 requirements
What clinical data/assessments are needed to identify complications early?			Heel stick	Blood cultures & pulse OX Bile
What nursing interventions will the nurse implement if the anticipated complication develops?			give glucose water or BM -recheck 30min	s/s sepsis → O2 30% Blender 2L NC Hep B

## 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
Phytonadine	Vitamin	Helps give vit K to help baby with clotting factors	anaphylaxis dyspnea cyanosis	Administer slowly watch O2 monitor HR
Erythromycin ophthalmic ointment	macrolides	Helps prevent the baby from eye infections	redness hypersensitivity	check eyes prior check allergies monitor after given
Hep B	vaccine	prevents adults hep B infections	site reaction erythema	obtain consent check moms GBS status Baseline vs
Sucrose Solution 24%	carbohydrate solution	works by affecting the baby's pathways to give pain control	Bloating glucose instate	check BS %

## Nursing Management of Care

1. 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	stabilize baby / Resp / BS / VS		
Goal/Outcome	→ to prevent RDS, hypoglycemia & sepsis		
Priority Assessment/Intervention(s)	Rationale	Expected Outcome	
1. Heel stick for BS	1. Baby is showing s/s of hypoglycemia	1. Baby will be hypoglycemic, tx	
2. Respiratory	2. Baby O ₂ has dropped	2. Baby is having trouble Breathing	
3. GBS / Hep B Blood Cultures	3. Mom was GBS + and untreated and baby has not been give Hep B	3. Baby may be septic, tx	

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
RBC	9.7 ↑	RBC's increase glucose consumption
Hgb	25.8 ↑	POOR circulation / hypoglycemia
Hct	65.9 ↑	impaired oxygen / hypoglycemia
Metabolic Panel Labs		
Are there any Labs results that are concerning to the Nurse?		
Yes, RBC's, Hgb, Hct		

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