

OB Simulation Patient Preparation Worksheet

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

Student Name: Alyssa Pagano Admit Date: _____
 Patient initials: BB Williams G3 P0 AB1 L2 M0 EDD: / / Gest. Age: 38w + 3/7
 Blood Type/Rh: _____ Rubella Status: _____ GBS status: _____
 Obstetrical reason for admission: inability to stabilize temperature following delivery
 Complication with this or previous pregnancies: gestational diabetes + elevated bp last 3 weeks
 Chronic health conditions: na
 Allergies: NKA
 Priority Body System(s) to Assess: Circulatory system & Respiratory 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	Pathophysiology of Medical/Obstetrical Problem
n/a	n/a
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Newborn Polycythemia & Hypocalcemia	Abnormally high concentration of RBC's causing Hyperviscosity. This slows blood flow, O ₂ delivery, poor circulation, & inability to control thermoregulation.

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.	n/a	n/a	Hypoglycemia	Blood clots (pulmonary embolism/stroke)
What interventions can prevent them from developing?			provide adequate feeding	IV fluids & maybe vit k. Vaccine?
What clinical data/assessments are needed to identify complications early?			blood sugar checks	Hgb/Hct/RBC/WBC levels
What nursing interventions will the nurse implement if the			treat low w/ breast milk, formula, or 5% glucose H ₂ O	give IV fluids Heparin? warm compresses O ₂

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Surgery or Invasive Procedures – LEAVE BLANK if this does not apply to your patient
 Describe the procedure in your own words. *n/a*

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. *n/a*

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
Phytonadione 1mg IM	anticoagulant (vitamin)	Proteins released from the liver get activated & cause blood to clot	n/v or diarrhea/sweating/redness @ IM site	Obtain consent/check CBC levels/watch for bleeding &/or any allergic reactions
Erythromycin oint 0.5%	ABX	Preventing or killing any bacteria on the surface its applied to.	eye irritation or redness	Assess for purulent discharge/eye color or any allergic reactions
Hep B IM Vaccine	viral vaccine	to prevent spread of Hep-B during birth & chronic liver disease	irritation/low-flow/injection site redness	assess newborn well-being 30 minutes after to ensure no reactions
Sucrose sol. 24% 1-2mL po	simple sugar	Used to comfort newborn prior to procedures/ivs/blood draws	can raise blood glucose	watch blood sugar & use sparingly.

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	Goal/Outcome	Priority Assessment/Intervention(s)	Rationale	Expected Outcome
Watch for Hypoglycemia & blood clotting	Treat successfully & ensure newborn can maintain thermoregulation	<ol style="list-style-type: none"> Perform heel-stick blood glucose reading ASAP Assess mom-to-baby feeding schedule & if mom is recognizing baby cues Continue to assess baby's temperature & signs of distress 	<ol style="list-style-type: none"> Infant presenting mottled, jittery, ↑ RR, & grunting To ensure our baby is getting the nutrients needed to maintain metabolic demands of body. Due to newborn's inability to hold a temperature despite external methods 	<ol style="list-style-type: none"> Treat low blood sugar with breast milk, formula, or 5% glucose w/ rearsers blood sugar in mind after feedings. Teach mom to recognize cues & ensure a feeding routine. To reach a state of thermoregulation in the baby.

Abnormal Relevant Lab Test	Current	Clinical Significance
Complete Blood Count (CBC) Labs		
7 RBC	10.6	elevated (range is 4.1-6.1)
7 HGB	26.9	elevated (range is 14.5-24.5)
7 Hct	69.4	elevated (range is 44-64)
Metabolic Panel Labs		
WBC	10.5	Ref range: 9.0-30.0
Platelet	270	Ref range: 150-450
Are there any Labs results that are concerning to the Nurse?		
The RBC/HGB/Hct elevated levels		

Current Priority Focused Nursing Assessment							
CV	Resp	Neuro	GI	GU	Skin	VS	Other
★ including ★ circulating	★						