

Student Name: Nikita Moreno

Outpatient Preparation Worksheet - OB Simulation

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

Patient initials: <u>CW</u>		Date of Admission:						
EDD: <u>8/10</u>	Gest. Age: <u>39 217 wks</u>	G: <u>3</u>	P: <u>2</u>	T: <u>2</u>	PT	AB	L: <u>1</u>	M
Blood Type / Rh: <u>O-</u>		Rubella Status: <u>immune</u>				GBS Status: <u>negative</u>		
Complication with this or Previous Pregnancies: Previous: <u>gestational diabetes, HTN, PPD, stillbirth (IUD)</u> Current: <u>protein in urine, edema (ank, ft, hands), gestational diabetes, BP</u>								
Chronic Health Conditions: <u>maternal obesity</u> <u>↳ High risk gestational diabetes, HTN, pre-eclampsia, C-section</u>								
Allergies: <u>Morphine</u>								
Current Medications: <u>PNU, Acetaminophen, Suave, Nivalog</u> <u>↳ Sliding Scale</u>								
Patient Reported Concern Requiring Outpatient Evaluation: <u>decreased fetal movement</u>								
What PRIORITY assessment do you plan based on the patient's reported concern? <u>(EFM) FHR + MC, maternal vit, maternal BG</u>								

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
<u>PNU</u>	<u>vitamin</u>	<u>increase vitamins & minerals in body</u>	<u>constipation, nausea</u>	<u>↑ fiber, ↑ fluids, ↑ movement take w/ food encourage adherence</u>
<u>Acetaminophen</u>	<u>analgesic anti-pyretic</u>	<u>lower fever & pain by blocking enzymes in brain</u>	<u>↑ upset, N/V/D</u>	<u>report abd discomfort, avoid do not exceed 4000mg/day assess + monitor pain/fever</u>
<u>Suave</u>	<u>decongestant</u>	<u>vasoconstriction of blood vessels in nose</u>	<u>insomnia, dizziness, nausea</u>	<u>don't take at bedtime get up slowly ↑ fluids</u>
<u>Nivalog</u>	<u>rapid insulin</u>	<u>lowers blood sugar</u>	<u>hypoglycemia</u>	<u>assess blood glucose give w/ food monitor for hypoglycemia</u>

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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
Preeclampsia	Maternal HTN puts mom at risk for preeclampsia which can cause placental insufficiency
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
decreased blood flow	placental insufficiency leads to ↓ blood flow to baby & causes hypoxia & respiratory problems

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.	Hyperglycemia HTN	death	macrosomia	IUGR
What assessments are needed to identify complications early?	vital signs blood sugar	vital signs	blood sugar	FHR Fetal movements
What nursing interventions will the nurse implement if the complication develops?	BP meds insulin	early monitoring	manage blood sugars	early monitoring

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	Stop preeclampsia from progressing	
Goal/Outcome	Baby oxygenation, safe delivery, mom BP ↓	
Priority Assessment/Intervention(s)	Rationale	Expected Outcome
1. blood pressure	1. preeclampsia	1. manage BP
2. EFM	2. fetal movement	2. Accelerations
3. blood sugar	3. gestational diabetes	3. Normal blood sugar

