

Student Name

Student Name: Pre Allen

# Outpatient Preparation Worksheet - OB Simulation

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

Patient initials: <u>AA</u>				Date of Admission:					
EDD: <u>3/27/XX</u>	Gest. Age: <u>29 5/7</u>	G: <u>2</u>	P: <u>1</u>	T: <u>1</u>	PT:	AB:	L: <u>1</u>	M:	
Blood Type / Rh: <u>O Rh+</u>			Rubella Status: <u>Immune</u>			GBS Status: <u>+</u>			
Complication with this or Previous Pregnancies: <u>none</u>									
Chronic Health Conditions: <u>Asthma</u>									
Allergies: <u>Penicillin</u>									
Current Medications: <u>Pre-natal vitamins, Singular, Advair MDI, Proventil MDI</u>									
Patient Reported Concern Requiring Outpatient Evaluation: <u>Contractions 10 min apart for 1 hour</u>									
What PRIORITY assessment do you plan based on the patient's reported concern? <u>Assess how long contractions, Place on PPHM, ask about ruptured membranes intensity &amp; progression.</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>Singular</u>	<u>Leukotrine receptor antagonist</u>	<u>Blocks chemicals in the air way that cause bronchoconstriction, swelling, mucus production</u>	<u>headache fatigue</u>	<u>give at bed time check O2 sat &amp; listen to lungs (not for acute asthma)</u>
<u>Advair MDI</u>	<u>Corticosteroid &amp; LABA</u>	<u>Improve lung fx by ↓ inflammation</u>	<u>thrush Headache cough muscle ache</u>	<u>make sure pt knows to rinse mouth O2 assessment</u>
<u>Proventil MDI</u>	<u>SABA (bronchodilator)</u>	<u>causes airway to relax smooth muscle &amp; improve airflow</u>	<u>tachycardia dry mouth tremors</u>	<u>teach proper inhaler use O2 assessment cardiac assessment</u>

## 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
Latent Phase of labor C strep B + mem	1 <sup>st</sup> phase of first stage of labor decreasing progesterone & estrogen ↑ oxytocin release Baby bc thinning of cervix & dilation Progesterone is contracts the uterus
Fetal/Newborn Implications	Pathophysiology of Fetal/Newborn Implications
Strep B exposure	Bacteria can be passed during labor & cause sepsis, meningitis, or respiratory distress

## 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.	Active labor (need abox)		strep B exposure	sepsis
What assessments are needed to identify complications early?	determine if any ruptured membranes & cervical exam	membranes ruptured & labor progression < 4 hr.	strep B exposure check if mem has need abox	mom went untreated & strep B passed during labor
What nursing interventions will the nurse implement if the complication develops?	make sure IV access available give ampicillin or cefazolin	MO abox avail or baby comes before admin	respiratory distress	Sepsis

## 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	FHR, vaginal exam		
Goal/Outcome			
Priority Assessment/Intervention(s)	Rationale	Expected Outcome	
1. Place on FHM 2. Check if membrane ruptured if not start ampicillin or cefazolin 3. vaginal exam	1. making sure baby is not in distress, & able to measure contraction 2. mom is strep B+ so needs one of listed abox to prevent spread to baby 3. determine if mom is in active labor	1. baby will be in vertical position, c accelerations & heart rate 135-160 2. membrane will be intact, IV access, and abox administered 3. mom will be 100% effaced but dilated 4cm	

