

Firelands Regional Medical Center School of Nursing
Nursing Care Map

Student Name _____

Date _____

Noticing/Recognizing Cues:

Highlight all related/relevant data from the Noticing boxes that support the top priority problem

Assessment findings*:

- Firm Fundus, below belly button
- Small amount of lochia rubra
- Positive THC
- Minimal pain 2/10
- Prolonged membrane rupture 40 hours
- Normal vitals
- Preterm labor and delivery

Lab findings/diagnostic tests*:

- Positive THC
- WBC 20.9- Low
- RBC 3.3- Low
- Hgb 9.9- Low
- Hct 29.2- Low
- Potassium 2.9- Low
- Albumin 3.1- Low

Risk factors*:

- Infection
- Hemorrhage
- Mastitis- From choosing not to breastfeed/engorgement.
- THC use
- Social Services involvement
- Ruptured membranes for 40 hours at 36 weeks 0 days

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Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

Nursing priorities*:

Highlight the top nursing priority problem

- Risk for infection
- Post partum hemorrhage
- Constipation
- Post partum depression

Potential complications for the top priority:

- Sepsis
 - o Fever
 - o Tachycardia
 - o Fatigue
 - o HTN
- Acute Pain
 - o Fatigue
 - o Restlessness
 - o Tachycardia
 - o Dyspnea
- Electrolyte Imbalance
 - o Cognitive changes
 - o Decreased fluid output
 - o Muscle cramping

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Responding/Taking Actions:

Nursing interventions for the top priority:

1. Assess lochia for signs of infection at every pad change, foul smell, increased, pus.
2. Monitor vitals for increased temperature, heart rate or BP every 4 hours.
3. Monitor lab values, WBC daily when labs are drawn.
4. Give all ordered antibiotics daily if ordered.
5. Promote frequent peri care and peri pad changes.
6. Educate on signs and symptoms of infection from prolonged ruptured membranes at discharge.

Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- All labs will be normal- WBC, Hgb, Hct, Albumin, potassium.
- Negative for THC.
- All vitals will remain normal and not indicate infection.
- Lochia will remain small gradually going to scant and will not have a foul smell.
- Patient and baby will remain stable following a preterm birth.

Continue plan of care.