

Firelands Regional Medical Center School of Nursing  
Nursing Care Map

Student Name Shawnita Miller

Date 10/10/23

Noticing/Recognizing Cues:

**\*Highlight all related/relevant data from the Noticing boxes to develop the priority problem\***

Assessment findings\*:

- Lower back pain
- Breast tenderness
- Abdomen cramping
- Ear infection
- **Lochia- moderate amount rubra in color**
- Legs no edema present
- Emotions WNL stated by the patient.
- **2 degree laceration with repair**
- **Pain level 6/10**

Lab findings/diagnostic tests\*:

- RBC 3.89 mg/dL
- **HGB 8.0 g/dL**
- HCT 31.2%
- WBC:14.1

Risk factors\*:

- Age 29
- Breast feeding
- Postpartum hemorrhage
- **2-degree laceration with repair**
- **Hemoglobin 8.0 g/dL**
- **Pain in perineal area**
- Cracked nipples.

Interpreting/Analyzing Cues/  
Prioritizing Hypotheses/  
Generating Solutions:

Nursing priorities\*:

**\*Highlight the top nursing priority problem\***

- Knowledge deficit Postpartum
- Acute pain
- **Altered tissue perfusion.**

Potential complications for the top priority:

- **Infection-** increased temperature, chills, fatigue
- **Mastitis-** nipple discharge, swelling, malaise
- **Postpartum hemorrhage-** Decreased blood pressure, increased heart rate, tachycardia
- **Dehiscence-** Pain, redness, bleeding, swelling, drainage of fluids.

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Responding/Taking Actions:

Nursing interventions for the top priority:

- 1) **Assess vitals Q 8 hours and PRN (0600,1400,2000,2400)**  
Rationale- To monitor for any changes in Blood pressure and body temperature.
- 2) **Perform skin assessment Q 4 hours and PRN (0600,1200,1600,2000,2400)**  
Rationale- - To monitor laceration site for discoloration or drainage.
- 3) **Assess for signs and symptoms of infection Q 8 hours (0600,1400,2200,2400)**  
Rationale- - Patient can catch early signs and get medical attention if needed.
- 4) **Assess pain level Q 4 hours and PRN (0600,1000,1400,1800,2200)**  
Rationale- -To determine if pain management is working.
- 5) **Administer Ibuprofen 600mg Q 6 hours (0600,1200,1800,2400)**  
Rationale- - To keep pain at a manageable level.
- 6) **Administer ferrous sulfate 65 mg one time a day.**  
Rationale- To raise HBG levels.
- 7) **Educate patient on proper cleansing technique of perineal area.**  
Rationale- o keep from spreading bacteria into the perineal area to the laceration causing infection.
- 8) **Educate patient on signs and symptoms of dehiscence's of a wound.**  
Rationale- To prevent further damage to wound, and what to do if any symptoms present.

Evaluation of the top priority:

- Patient will remain free from infection.
- Laceration will remain well approximated with no drainage
- Pain will remain at a manageable level
- Voice back understanding of how to properly cleanse perineal
- Raise Hemoglobin to 12.5g/dL
- **Continue plan of care** with education and medication to increase hemoglobin while at home.