

Firelands Regional Medical Center School of Nursing
Nursing Care Map

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Date 09/10/2024

Noticing/Recognizing Cues:

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

Assessment findings*:

- Moderate, Rubra lochia
- BLE Non-pitting edema
- Quarter sized clots
- Boggy uterus, firm after massage
- Uterus below umbilicus
- Temp 98.1
- HR- 68 bpm
- RR- 16
- SpO2- 96%
- BP- 127/87
- Patient presents as energetic
- c/o cramping
- Reports pain 5/10

Lab findings/diagnostic tests*:

- WBC- 10.6
- RBC- 4.19
- Hgb- 13.2
- HCT- 37.2
- Platelets- 257

Risk factors*:

- H/O
 - o Miscarriage
 - o Ectopic pregnancy with Rt Salpingectomy
 - o Lumbar discectomy
 - o HPV anogenital infection
 - o Sebaceous cyst on breast
- Former Smoker

Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

Nursing priorities*: ***Highlight the top nursing priority problem***

- Acute Pain
- Decreased Diversional Activity Engagement
- Decreased Activity Tolerance
- Risk for Constipation
- Impaired comfort
- Labor Pain
- Risk for Postpartum Hemorrhage

Goal Statement: Patient will have scant to light lochia before discharge.

Potential complications for the top priority:

- Decreased Level of Consciousness
 - o Minimal response to stimuli
 - o Lethargy
 - o Delirium
- Hypovolemic Shock
 - o Low bp
 - o Tachycardia
 - o SOB
- Respiratory Distress
 - o SOB
 - o Muscle weakness
 - o Low SpO2

Responding/Taking Actions:

Nursing interventions for the top priority:

1. Assess bp and hr every 15 minutes for the first hour after labor (Linnard-Palmer & Coats, 2021)
 - a. Rationale: To monitor for potential postpartum hemorrhage
2. Assess vital signs every hour after labor for the first 8 hours and PRN
 - a. Rationale: To monitor for potential postpartum complications
3. Assess fundus every 15 minutes for the first hour and every hour after labor for the first 8 hours and daily
 - a. Rationale: To monitor the contraction of the fundus
4. Assess lochia every hour after labor for the first 8 hours and daily
 - a. Rationale: To monitor for any abnormal bleeding
5. Administer Pitocin 20 units/LR 1000 ml IV at 125 ml/hr immediately after birth ONCE
 - a. Rationale: To encourage contraction to close blood vessels after delivery of the placenta
6. Administer Methergine 0.2 mg/ml diluted in 5 ml of NaCl IV PRN ONCE
 - a. Rationale: In case of occurrence of postpartum hemorrhage and encourage closing of vessel to stop bleeding
7. Administer Carboprost 250 mg/ml IM every 15-90 minutes PRN
 - a. Rationale: In case of occurrence of postpartum hemorrhage and encourage closing of vessel to stop bleeding
8. Administer Ibuprofen 600 mg po q6h PRN
 - a. Rationale: To relieve pain after birth
9. Administer acetaminophen 500 mg po q6h PRN
 - a. Rationale: To relieve pain after birth
10. Educate on the importance of reporting excessive bleeding postpartum every hour and daily
 - a. Rationale: To prevent potential postpartum hemorrhage early
11. Educate on reporting clots larger than a dime every hour and daily
 - a. Rationale: To prevent potential postpartum hemorrhage early
12. Educate on returning to normal activity gradually and taking frequent rest periods daily
 - a. Rationale: To prevent any postpartum complications upon discharge

Reflecting/Evaluate Outcomes:



Evaluation of the top priority:

- Light, rubra lochia
 - BLE Non-pitting edema
 - No clots
 - Firm uterus
 - Uterus below umbilicus
 - Patient presents as energetic
 - No cramping reported
 - No pain reported
 - No change in h/o
- No change in h/o
 - Miscarriage
 - Ectopic pregnancy with Rt Salpingectomy
 - Lumbar discectomy
 - HPV anogenital infection
 - Sebaceous cyst on breast
 - No change in former smoker status
 - Continue plan of care

Reference: Linnard-Palmer, L., & Coats, G. H. (2021). *Safe maternity and pediatric nursing care*. F.A. Davis.