

**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\*:**

- Large clots
- Bleeding (hemorrhage)
- BP 60/30
- Uterine atony
- Temp 97.2
- "Not feeling well"
- "Light-headed"
- Pulse 88

**Lab findings/diagnostic tests\*:**

- Hgb 8.6L
- Hct 26.3L
- RBC 2.75L
- WBC 14.8H
- Plt count 137L
- Neut# 10.7H
- Mono# 1.1H
- Urine protein 20H
- Ur leukocyte esterase 2+H
- Urine bacteria 1+H
- Urine appearance Cloudy A
- Urine occult blood 2+H
- Urine RBC 10-19H
- Urine WBC 10-19H
- Urine WBC Clumps Few H
- Ur Squamous Epith Cells 10-19H

**Risk factors\*:**

- Multiple pregnancies
- Hx STI's
- Gravida 5:2
- Group B Strep
- Vaginosis
- Rh-
- 4 hrs PPH (Postpartum Hemorrhage)

**Interpreting/Analyzing Cues/  
Prioritizing Hypotheses/  
Generating Solutions:**

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

- Risk for bleeding (PPH)**
- Risk for Infection
- Risk for decreased cardiac output
- Acute pain
- Post-Trauma Syndrome & Risk for PTS
- Risk for Adult falls
- Risk for thrombosis
- Risk for unstable BP

**Goal Statement:**

Goal is to ensure patient's bleeding is scant or a small amount of lochia by discharge of patient

**Potential complications for the top priority:**

- Hypovolemic shock
  - Low BP
  - High HR (tachycardic)
  - Pale/cyanotic
- Anemia
  - Low Hgb, Hct, RBC
  - Dizziness
  - Fatigue
- PTSD
  - Uterine infections
  - PPH (postpartum hemorrhage)
  - Extended use of oxytocin during delivery

### Responding/Taking Actions:

#### Nursing interventions for the top priority:

- **Assess vital signs Q2H**
  - **Ensure the patient's BP does not drop**
- Assess Postpartum Assessment Q2H**
  - Ensure the patient's lochia is reducing**
- Assess mental status Q4H**
  - Ensure patient is not having any anxiety**
- Monitor patient's CBC BID**
  - Ensure that the patient's Hgb, Hct, & RBC do not decrease**
- Monitor fluid intake Q2H**
- Monitor medication administration Q4H**
  - Ensure patient is receiving meds to encourage uterine contractions**
- Monitor patient's edema Q2H**
  - Ensure that the patient's edema is not getting worse**

### Reflecting/Evaluate Outcomes:

#### Evaluation of the top priority:

- BP 102/67
- Temp 98.5
- Lochia has reduced to moderate or less Q1H
- Pt no longer has visible clots
- Pt no longer has any light-headed or not feeling well assessments
- Upon assessment of fundus, uterus is contracting and reducing by 1 finger breadth Q4H
- \*Labs had not been drawn and returned by the time I left
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#### Reference:

*Welcome to skyscape.* Skyscape Medpresso inc. (n.d.). <https://www.skyscape.com/>