

Firelands Regional Medical Center School of Nursing

Online Laboratory Document

Fall 2025

Please complete the following questions based on information given in the Lessons MCN Week 1 Lab tab. Submit to the MCN Online Lab Dropbox by **Wednesday August 20, 2025 at 0800**. Bring a copy of this document to lab on Wednesday to receive the answers.

Women's Health Questions

Online lab activity: Breast Self-Exam

Objectives: 1, 4, 5, 6

<https://www.youtube.com/watch?v=nkPR4ar1EQ4&t=19s>

Please follow the link. Watch the video and follow the steps on how to conduct a breast self-exam then answer the following questions:

1. What is a breast self-exam?

An exam in which you are able to look and feel for any changes in your own breasts such as lumps.

2. What position(s) should the client be in while performing a self-exam?

One position is laying down with head on a pillow with one arm behind your head to prop yourself up. Another, for looking, is to sit or stand in front of a mirror with your clothes off to look at both breasts to see if there are any differences between the two. You can also put your hands on your hips and turn side to side to better see any changes.

3. What are two methods for palpating the breast tissue?

One method is going in a circular motion around the breast going in every area or another is going up and down all the way across the breast.

4. What would the lump feel like compared to a lymph node?

It would feel like a pea, marble, or walnut. Something different from the surrounding tissue and something that stands out.

5. How often should your client do a self-exam?

They should do it the same time each month.

6. When should the client notify their healthcare provider about their self-exam?

The client should notify if they noticed any changes from what they normally feel during their self-exam. Such as any new lumps that they previously didn't have.

Pregnancy History Questions

Activity 1:

Laura is scheduled for her first prenatal visit today. She is 12 weeks gestation. She is a primigravida. What would her GTPAL be?

G=1 T=0 P=0 A=0 L=0

Her last menstrual period (LMP) was known to be November 7. According to Nagele's Rule what is her estimated date of delivery (EDD)?

-August 14

The Fetal Heart Rate (FHR) is found using a hand-held Doppler. The FHR is 145. Is this a normal or abnormal finding (circle one answer)? Do you anticipate a potential intervention to be performed (circle one answer)?

Heart Rate Finding- Normal

Intervention- No

Activity 2:

Katie is scheduled for a prenatal visit today. She is 25 weeks gestation today. She has had three previous pregnancies, one preterm-living and well, one term-living and well, and one spontaneous abortion at six weeks gestation. What is her GTPAL?

G=4 T=1 P=1 A=1 L=2

Her LMP was last known to be January 12. According to Nagele's Rule, what is her EDD?

October 19

FHR is found with the hand-held Doppler. The FHR is 175. Is this a normal or abnormal finding (circle one answer)? Do you anticipate a potential intervention to be performed (circle one answer)?

Heart Rate Finding-Abnormal

Intervention- Yes

Activity 3:

Anna is scheduled for a prenatal visit today. She is 30 weeks gestation today. She has had four previous pregnancies, two preterm-living and well, two term-living and well, and no spontaneous abortions. What is her GTPAL?

G=5 T=2 P=2 A=0 L=4

Her LMP was last known to be December 13. According to Nagele's Rule, what is her EDD?
- September 20

FHR is found with the hand-held Doppler. The FHR is 110. Is this a normal or abnormal finding (circle one answer)? Do you anticipate a potential intervention to be performed (circle one answer)?

Heart Rate Finding- Normal

Intervention- No

Activity 4:

Sara is scheduled for a prenatal visit today. She is 36 weeks gestation today. She has had five previous pregnancies, one preterm-living and well, two term-living and well, and two spontaneous abortion at six weeks gestation and 12 weeks gestation. What is her GTPAL?

G=6 T=2 P=1 A=2 L=3

Her LMP was last known to be June 28. According to Nagele's Rule, what is her EDD?
- April 4

FHR is found with the hand-held Doppler. The FHR is 95. Is this a normal or abnormal finding (circle one answer)? Do you anticipate a potential intervention to be performed (circle one answer)?

Heart Rate Finding- Abnormal

Intervention- Yes

Activity 5:

Emily is scheduled for a prenatal visit today. She is 18 weeks gestation today. She has had one previous pregnancy, no preterm, one term-living and well, and no spontaneous abortions. What is her GTPAL?

G=2 T=1 P=0 A=0 L=1

Her LMP was last known to be August 5. According to Nagele's Rule, what is her EDD?
- May 12

FHR is found with the hand-held Doppler. The FHR is 130. Is this a normal or abnormal finding (circle one answer)? Do you anticipate a potential intervention to be performed (circle one answer)?

Heart Rate Finding- Normal

Intervention- No

Activity 6:

Debra is scheduled for a prenatal visit today. She is 29 weeks gestation today. She has had eight previous pregnancies, three preterm-living and well, two term-living and well, and three spontaneous abortions at six, eight, and 12 weeks gestation. What is her GTPAL?

G=9 T=2 P=3 A=3 L=5

Her LMP was last known to be April 20. According to Nagele's Rule, what is her EDD?

- January 27

FHR is found with the hand-held Doppler. The FHR is 160. Is this a normal or abnormal finding (circle one answer)? Do you anticipate a potential intervention to be performed (circle one answer)?

Heart Rate Finding- Normal

Intervention- No

Newborn Assessment of Fetal Well-Being (APGAR)

Directions: Review the information provided and answer the questions.

Activity 1:

Baby A. was born at 38 weeks gestation after 16 hours of normal labor and delivery. He had acrocyanosis, good flexion, active motion, good vigorous cry, cough, and sneeze with a respiratory rate of 50 and a heart rate of 160. Determine the APGAR Score with the information provided.

Heart Rate:2

Respiratory Effort:2

Muscle Tone: 2

Reflex Irritability: 2

Skin Color:1

Score: 9

Activity 2:

Baby D. was born at 34 weeks gestation by and uneventful spontaneous, normal vaginal delivery. The baby is blue, non-reactive, and is flaccid and limp. The baby is not breathing and the heart rate is 70. Determine the APGAR Score with the information provided.

Heart Rate:1

Respiratory Effort: 0

Muscle Tone: 0

Reflex Irritability: 0

Skin Color: 0

Score: 1

Activity 3:

Baby C. was born at 28 weeks gestation after the mother's water broke at home. A normal labor and delivery is noted. Baby is flaccid and limp with slow, irregular weak cry and grimace. Baby has

acrocyanosis. The respiratory rate is 20 and the heart rate is 80. Determine the APGAR Score with the information provided.

Heart Rate:1
Respiratory Effort: 1
Muscle Tone: 0
Reflex Irritability:1
Skin Color:1

Score: 4

Activity 4:

Baby B. was born at 36 weeks gestation after 8 hours of normal labor and delivery. The baby has acrocyanosis, some flexion of extremities, weak cry and grimace, slow and irregular cry. The respiratory rate is now 30 and the heart rate is 150. Determine the APGAR Score with the information provided.

Heart Rate: 2
Respiratory Effort:1
Muscle Tone: 1
Reflex Irritability:1
Skin Color: 1

Score: 6

Postpartum and Newborn Discharge Education Lab Questions

POSTPARTUM (pg. 216-222 in text may be helpful)

1. You are preparing discharge instructions for Stella and Leopold. As the primary nurse, what vaccine would you recommend Stella's family and friends receive to keep Leopold healthy?

A. MMR	C. Hep B
B. Tdap	D. Meningitis

2. Stella states she is having pain 6/10 in her perineal area. What medication would be recommended for her pain?

A. Vicodin	C. Ibuprofen
B. Dilaudid	D. Percocet

3. After giving Stella her discharge instructions, you help her go through her room to gather items she has been using during her stay that she can also use at home. What items would you collect and send? (Select all that Apply)
- A. Peri-bottle**
 - B. Tampons
 - C. Pamphlet on sedentary lifestyle
 - D. Anesthetic spray**
 - E. Small bottle of hand sanitizer**
 - F. Pamphlet on birth control after delivery**
 - G. Medication order for loperamide
 - H. Water container**
4. As you are going through the discharge instructions for Stella, she asks when would be appropriate to call her healthcare provider. You advise her that she should notify the healthcare provider if which of the following occurs?
- A. Temperature 37.5°C
 - B. Increased vaginal bleeding**
 - C. Passing dime sized clots
 - D. Increased abdominal pain**
 - E. Increased discharge from incisions (c/section or episiotomy)**
 - F. Foul smelling lochia**

NURSERY (pg. 263-267 in text can help)

1. In preparing to discharge Leopold home with Stella, which statement made by Stella requires further investigation by the nurse?
- A. **“The car seat faces the trunk.”**
 - B. “Leopold is using my nephew’s old car seat.”
 - C. “I need to sleep when he sleeps.”
 - D. “I need to keep his head covered.”
2. In teaching Stella about umbilical cord care, you know she understands education when she makes which statement?
- A. “I can put him in the shower with me.”
 - B. “I need to sponge bath him until the cord falls off.”**
 - C. “I can put antimicrobial cream all over the cord until it falls off.”
 - D. “I can dry the cord after a bath with the hairdryer as long as it’s on the lowest setting.”
3. In teaching Stella about circumcision care, which of the following would be included? (Select all that apply)
- A. Notify HCP if baby has not urinated.**
 - B. Notify HCP if baby temp is greater than 37.8°C (100°F) axillary.**
 - C. Notify HCP if there is discoloration of the penis.**

D. Notify HCP if the “yellow crust” is not able to be washed off.

E. Notify HCP if there is a blood spot in the diaper larger than 2”.

4. You are teaching Stella how to use the bulb syringe. Which option lists the correct steps in using the bulb syringe?
- A. Put the tip of the syringe into the nose and compress to remove air. Release the compression to provide suction and squeeze the mucous into a tissue.
 - B. Put the tip of the syringe into the nose and wait for it to fill with mucous. Then compress to squeeze the mucous out into the tissue.
 - C. Compress the syringe, and then gently place into a nostril. Release the compression to provide suction and squeeze the mucous into a tissue.**
 - D. Do not use a bulb syringe. Instead have the infant blow his nose.
5. You are demonstrating how to trim baby Leopold’s nails. You realize further teaching is needed when Stella makes what statement?
- A. “I will have him wear cuffed, long sleeved onesies.”
 - B. “I can use baby clippers or scissors.”
 - C. “Apply a Band-Aid on his finger if I cut it.”**
 - D. “I will trim to make rounded edges.”
6. Stella has some questions about breastfeeding. Based on the information given, what is important to educate her on about breastfeeding? (Select all that Apply)
- A. Rooting and chewing on hands are hunger cues.**
 - B. Getting Leopold on a regular schedule should be an easy process.
 - C. Newborns that are breast fed should be fed every 2.5 hours.
 - D. Newborns need to eat “on demand” once breastfeeding is well established.**
 - E. Unless the healthcare provider states its necessary, the baby does have to be woken up to feed.

Newborn Assessment Variations Matching

1. When educating Latashia's mother about hypothermia, what information would you include about risk factors of hypothermia in her newborn?
 - Some risk factors are prematurity, low birth weight, and small size. Which mean they have less body fat to maintain warmth.

2. What signs and symptoms of hypothermia should Latashia's mother look for in her newborn?
 - Signs and symptoms such as acrocyanosis and cool, pale skin.
 - Hypoglycemia
 - Bradycardia
 - Tachypnea and shallow, irregular respirations
 - Feeble cry and decreased weight
 - Decreased activity

3. List the 4 methods of heat loss and how they can occur in the newborn.
 1. Evaporation: amniotic fluid evaporates from skin. Factors that contribute to this in a newborn are their surface area, vapor pressure, and air velocity.
 2. Conduction: Transfer of heat between two solid objects. For example, if a newborn was placed on a cold table.
 3. Convection: When a newborn is exposed to cool surrounding air.
 4. Radiation: When a newborn is near cool objects without having contact with them.

4. What are the hazards of hypothermia?

Increased cellular metabolism occurs while newborn tries to stay warm leading to increased oxygen consumption increasing their risk for hypoxia, cardiorespiratory complications, and acidosis. Hypoglycemia, neurological complications, hyperbilirubinemia, clotting disorders, or death can also occur.

5. What are some interventions the nurse can implement to help prevent hypothermia in the newborn?

The “warm chain” is a set of procedures to be performed at and after birth for the next few days to minimize heat loss in newborns. Equipment such as overhead heaters, heated mattresses, and incubators are also used.

Newborn Circumcision Care Questions

Directions: Review the information provided and answer the questions.

1. What care is provided to the penis after circumcision?
 - Want to keep clean and use petroleum jelly on the circumcision to prevent it from sticking on the diaper. It also provides some protection within diaper after baby poops/pees.

2. What education should be provided to parents about what to expect post circumcision?
 - As it heals it will get very red and swollen, typically peaking around the 3rd or 4th day, and to not be alarmed by this. Yellow film is also normal and like a scabbing process. If excess bleeding or signs of infection call HCP.

Infant Swaddling

1. Review video and handout online and be prepared to practice swaddling during lab.

Newborn Bath

1. Review video online and be prepared to practice bathing a newborn during lab.

Pediatric Pain Scale Questions

Please use the **NIPS pain scale** to determine the pain level and management options for the following patients.

Rose was delivered 16 hours ago. She is relaxed and is resting quietly in bed, sleeping for the past hour. Extremities are relaxed X four. Heart rate is within 10% of baseline and O2 saturation is 97% on room air.

According to the NIPS pain scale, what is Rose's pain level? 0(mild)

What would our pain management options be for Rose? Pacifiers, swaddling, decreased stimuli, position changes

Using Rose's assessment, what would she score using the CRIES pain scale? 0

Bobby is a one-day-old infant. He is vigorously crying and intermittently holding his breath. All four extremities are tense and rigid. He is fussy and restless in his crib. His heart rate is 15% above baseline and he receiving 0.5L O2 via cannula to maintain O2 saturation above 95%.

According to the NIPS pain scale, what is Bobby's pain level? 8(severe)

What would our pain management options be at this level?

Narcotic intermittent bolus and consider narcotic drip

Name 7 physiological effects of pain:

1. Tachycardia
2. Increased O2 consumption
3. Hypoxemia
4. Pallor, flushing
5. Pupillary dilation
6. Temperature changes
7. Increased intracranial pressure

Name 5 things we can do to prevent or minimize pain:

1. Reduce number of needle punctures by drawing blood tests at one time
2. Use indwelling venous or arterial catheters
3. Avoid invasive monitoring if possible
4. Use minimal amount of tape and remove gently
5. Ensure proper premedication before invasive procedures

Meditech Postpartum and Newborn Documentation

*Make sure to include the assessment and specific section of the assessment for your response

1. List the assessment section where you would chart the uterus position.
 - OB General: Postpartum assessment set: Uterus Position
2. List the assessment section where you would chart leg swelling/edema.
 - OB General: Cardiovascular Assessment: Edema
3. List the assessment section where you would chart mother's emotional state.
 - OB General: Psychosocial Assessment: Expressed feelings
4. List the assessment section where you would chart if you witnessed a breastfeeding session.
 - Breast Assessment: Breastfeeding Effectiveness
5. List the assessment section where you would chart an episiotomy.
 - Genitourinary Assessment: Genitourinary comment
6. List the assessment section where you would chart infant safe sleep practices education.
 - Newborn Assessment: Activity/Behavior
7. List the assessment section where you would chart a NIPS pain scale.
 - Newborn assessment: NIPS Pain Scale
8. List the assessment section where you would chart a head molding.
 - Newborn assessment: Head/Face/Neck: Head molding
9. List the assessment section where you would chart the cord clamp being in place.
 - Newborn assessment: Abdomen/GI: Umbilical Cord
10. List the assessment section where you would chart a testicle assessment
 - Newborn assessment: Genital/ GU: Newborn Genital
11. List the assessment section where you would chart the moro reflex.
 - Newborn assessment: Neurological/ Musculoskeletal: Moro Reflex Response
12. List the assessment section where you would chart a sacral dimple.
 - Newborn assessment: Neurological/ Musculoskeletal: Neuro Assessment
13. List the assessment section where you would chart if a newborn is eating breastmilk or formula.
 - Newborn I/O: Newborn Intake Assessment: Type/Method
14. List the assessment section where you would chart a newborn failing their hearing screening.

- Screenings: Newborn Hearing Screen: Results of Hearing Screen: Right/Left Ear