

Firelands Regional Medical Center School of Nursing  
Nursing Care Map

Student Name     Kayli Collins    

Date     09-19-2025    

Noticing/Recognizing Cues:

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

**Assessment findings\*:**

- No episiotomy or laceration
- **Small amount of lochia rubra**
- **Cramping pain in abdomen rated 5/10**
- Breasts are not painful, engorged, or cracked
- Left nipple flat, right nipple inverted
- Attempted breastfeeding with shield
- Attempted pumping and bottle feeding
- No edema noted
- **Blood pressure 151/91**
- Temperature 98.7 F
- Heart rate 65
- SpO2 99%
- Respiratory rate 18

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

- **Hgb 11.2 (low)**
- **Hct 33.5 (low)**
- WBC 8.9
- RBC 4.20
- Platelets 333

**Risk factors\*:**

- Young age (19 years old)
- Not employed
- Current smoker (vape)
- Marijuana user
- **Lack of knowledge**
- History of chlamydia
- Family history of cervical cancer
- **First pregnancy and delivery**

Interpreting/Analyzing Cues/  
Prioritizing Hypotheses/  
Generating Solutions:

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

- **Risk for postpartum hemorrhage**
- Risk for postpartum depression
- Knowledge deficit
- Ineffective breastfeeding

**Goal Statement: Patient will have a decreased risk of postpartum hemorrhage**

**Potential complications for the top priority:**

- Infection
  - Increased temperature (fever)
  - Discharge with odor and abnormal color
  - Fatigue and weakness
- Hypovolemic Shock
  - Hypotension
  - Light-headedness and dizziness
  - Tachycardia
- Death
  - Loss on consciousness
  - Cool and clammy skin
  - Weak to absent pulse

## Responding/Taking Actions:

### Nursing interventions for the top priority:

1. Assess lochia Q15 min PRN (color and amount)
  - a. To determine if patient is having excessive bleeding
2. Assess bleeding Q15 min PRN
  - a. To determine if patient is experiencing constant vaginal bleeding
3. Assess uterine atony Q15 min PRN
  - a. To determine if uterus is firm or boggy
4. Assess blood clots Q15 min PRN
  - a. To determine if blood clots are larger than a quarter
5. Assess skin Q4 hours PRN
  - a. To determine if patient is cool, clammy, and/or pale
6. Assess heart rate Q2 hours PRN
  - a. To determine if patient is tachycardic
7. Assess blood pressure Q2 hours PRN
  - a. To determine if patient's blood pressure is low
8. Assess level of consciousness Q2 hours PRN
  - a. To ensure patient is conscious
9. Perform a fundal massage Q2 hours PRN
  - a. To increase uterine atony
10. Weigh peri pads/linens PRN
  - a. To determine amount of blood loss during hemorrhage
11. Apply 2-3 L O2 via NC PRN
  - a. To ensure patient is getting adequate oxygen during hemorrhage
12. Administer oxytocin IV 10 units infused at 20-40 milliunits/min once
  - a. To assist with contractions and removal of blood during hemorrhage
13. Administer methergine IM 0.2 mg once
  - a. To assist with removal of blood during hemorrhage
14. Educate patient on reporting increased bleeding daily
  - a. To ensure quick interventions
15. Educate patient on reporting blood clots larger than a quarter daily
  - a. To ensure quick interventions
16. Educate patient on signs and symptoms of hypovolemic shock daily (dizziness, racing heart, etc.)
  - a. To ensure quick interventions

(Myers 2023) (Deglin, et. al. 2024)

## Reflecting/Evaluate Outcomes:

### Evaluation of the top priority:

- |   |                           |
|---|---------------------------|
| • No episiotomy or laceration                   | Temperature 98.7 F        |
| • Small amount of lochia rubra                  | Heart rate 65             |
| • Cramping pain in abdomen rated less than 5/10 | SpO2 99%                  |
| • Breasts are not painful, engorged, or cracked | Respiratory rate 18       |
| • Left nipple flat, right nipple inverted       | Hgb 11.2 (not remeasured) |
| • Attempted breastfeeding with shield           | Hct 33.5 (not remeasured) |
| • Attempted pumping and bottle feeding          |                           |
| • No edema noted                                |                           |
| • Blood pressure 147/82                         | Continue plan of care     |

### Reference:

Myers, E. (2023). *RNotes: Nurse's clinical pocket guide* (6th ed). F.A. Davis Company: Skyscape Medpresso, Inc.

Deglin, J. H., Vallerand, A. H., & Sanoski, C. A. (2024). *Davis's drug guide for nurses* (19th edition). F. A. Davis Company: Skyscape Medpresso, Inc