

Firelands Regional Medical Center School of Nursing
Nursing Care Map

Student Name: Bri Dobias

Date: 9/18/2025

Noticing/Recognizing Cues:

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

Assessment findings*:

- Heart Murmur
- Uninterested in education topics
- Uninterested in holding infant
- Not recognizing hunger cues of infant
- Inadequate infant hygiene
- Abdominal pain 3/10
- Strong smell of marijuana in room
- Verbalized wanting to stay in hospital for another day
- Does not have custody of her other two children
- Refused Hepatitis B vaccination of infant

Lab findings/diagnostic tests*:

- RBC 3.5 (low)
- Hgb 32.4 (low)
- Hct 32.4 (low)
- Hepatitis C positive
- Group B strep positive
- THC positive

Risk factors*:

- Hx of cocaine, heroin, and methamphetamine abuse
- Hx of 2x overdose
- THC use throughout pregnancy/ postpartum
- Hx of depression
- Report of family smoking marijuana with patient and infant in room
- Vaping
- Smoking ½ pack of cigarettes/day
- Hx of scoliosis
- Hx of back fracture
- Hx of bone tumor
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Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

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

- Knowledge deficit related to infant care
- Impaired parenting
- Risk-prone health behavior
- Risk for secondary PPH

Goal Statement:

Patient will demonstrate recognizing infant hunger cues, proper infant hygiene and care by discharge

Potential complications for the top priority:

- Imbalanced Nutrition: less than body requirements of infant (lack of appropriate weight gain, >5% weight loss of birth weight, insufficient muscle tone)
- Failure to thrive of infant (Inadequate weight gain, irritability, delayed developmental milestones)
- Dehydration of Infant (Weight loss, sunken fontanel, poor skin turgor)
- Neonatal abstinence syndrome (irritability, tremors, feeding intolerance) (Myers, 2022)
- Poor maternal-infant bonding (Inadequate knowledge of childcare, insufficient interactions, lack of family support)
- Neonatal hypothermia (Acrocyanosis, pallor, temperature of below 97.7 F)
- Infant Infection (Redness, swelling, heat)
- low self-esteem (Feelings of worthlessness, constant self-criticism, Fear of failure)
- hopelessness (Loss of interest, low energy, difficulty concentrating)
- Anxiety (Irritability, difficulty making decisions, excessive worry)

Responding/Taking Actions:

Nursing interventions for the top priority:

1. Develop rapport with patient throughout admission

Rationale: Establish trusting and therapeutic relationship with patient

2. Assess parenting skill level with every interaction

Rationale: Identify intellectual, and emotional strengths and weaknesses contributing to child care

3. Assess attachment behaviors between mother and child with every interaction

Rationale: Identify use of enface position, eye contact, communication, positive affect or other indications of positive maternal-infant bond

4. Determine presence of adequate support system on admission and throughout stay

Rationale: identify if patient has family members or friends involved in their support system

5. Encourage expression of feelings throughout admission

Rationale: identify areas of frustrations and enhance feeling of acceptance

6. Discuss parental role and beliefs of child care throughout admission

Rationale: Identify areas where further education is needed

7. Encourage attendance of family and parenting classes before discharge

Rationale: Promote education, feelings of independence, proper child care and wellbeing of infant

8. Encourage attendance at a drug rehabilitation center, detox unit, or narcotics anonymous center

Rationale: Promote discontinuation of marijuana use and continuation of sobriety from cocaine, heroin, and methamphetamine

9. Provide education on proper infant feeding and nutrition before discharge

Rationale: Promote adequate knowledge related to infant nutrition, feeding, hunger cues and safety

10. Provide education on circumcision care of infant before discharge

Rationale: Promote adequate healing of wound and prevention of infection

11. Provide education on recognizing signs and symptoms of infection before discharge

Rationale: Promote wellbeing of infant and prevention of worsening infection

12. Provide education on thermoregulation and proper dressing of infant before discharge

Rationale: Promote wellbeing of infant and prevention of hypo/hyperthermia

13. Provide education on infant safety topics before discharge

Rationale: Promote safety of infant related to sleeping arrangements, injury, aspiration, asphyxiation, and other potential dangers

14. Provide education on immunizations before discharge

Rationale: Promote wellbeing of mother and infant

15. Identify community resources available before discharge

Rationale: Provide assistance with individual needs, financial support, emotional support, and education needs

16. Report child safety and legal concerns as needed before discharge

Rational: promote safety and wellbeing of infant



Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- | | |
|---|-----------|
| Uninterested in education topics- | Improved |
| Uninterested in holding infant- | No change |
| Not recognizing hunger cues- | No change |
| Inadequate infant hygiene- | No change |
| Strong smell of marijuana in room- | No change |
| Refusal of Hepatitis B vaccination of infant- | No change |
| THC positive- | No change |

Continue plan of care

Reference:

Myers, E. (Year). RNotes: Nurse's Clinical Pocket Guide (6th ed.) [Mobile app]. F. A. Davis; Skyscape Medpresso, Inc.