

# Module Report

Tutorial: Real Life RN Maternal Newborn 3.0

Module: Preterm Labor



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Program Type: BSN

## Standard Use Time and Score

	Date/Time	Time Use	Score
Preterm Labor	10/5/2021 10:51:09 PM	31 min	Strong

## Reasoning Scenario Details Preterm Labor - Use on 10/5/2021 10:50:30 PM

### Reasoning Scenario Performance Related to Outcomes:

\*See Score Explanation and Interpretation below for additional details.

Body Function	Strong	Satisfactory	Needs Improvement
Cardiac Output and Tissue Perfusion	100%		
Excretion	100%		
Mobility	100%		
Reproduction	100%		

NCLEX RN	Strong	Satisfactory	Needs Improvement
RN Management of Care	100%		
RN Safety and Infection Control	100%		
RN Health Promotion and Maintenance	100%		
RN Pharmacological and Parenteral Therapies	100%		
RN Reduction of Risk Potential	100%		
RN Physiological Adaptation	100%		

QSEN	Strong	Satisfactory	Needs Improvement
Safety	100%		
Patient-Centered Care	100%		
Evidence Based Practice	100%		

### Decision Log:

Optimal Decision	
<b>Scenario</b>	Nurse Darla is interviewing Ms. Goodwin about her report of a burning sensation when voiding.
<b>Question</b>	Nurse Darla is interviewing Ms. Goodwin about her report of a burning sensation when voiding. Which of the following clinical findings should Darla anticipate? (Select all that apply.)
<b>Selected Ordering</b>	Dysuria Urinary frequency Fever
<b>Rationale</b>	Dysuria is a discomfort or difficulty with urination and is a clinical finding associated with a urinary tract infection. Vaginal discharge is a clinical finding associated with sexually transmitted infections. Urinary frequency is a common clinical finding associated with urinary tract infections. Epigastric pain is a clinical finding associated with clients who are experiencing HELLP syndrome. Fever is a common clinical finding associated with urinary tract infections.

Optimal Decision	
<b>Scenario</b>	Nurse Darla is evaluating Ms. Goodwin for uterine contractions.
<b>Question</b>	Nurse Darla assists Ms. Goodwin to bed. Which of the following is an appropriate action for Darla to take?
<b>Selected Option</b>	Apply a fetal monitor and tocotransducer.
<b>Rationale</b>	The nurse should use a tocotransducer to transabdominally evaluate the presence and frequency of uterine contractions.

Optimal Decision	
<b>Scenario</b>	Nurse Darla confirms uterine contractions are occurring on the fetal monitor.
<b>Question</b>	Nurse Darla confirms uterine contractions are occurring on the fetal monitor. Which of the following is the priority nursing intervention?
<b>Selected Option</b>	Check for effacement and cervical dilation
<b>Rationale</b>	The greatest risk to the client and her fetus is preterm labor. Assessing for effacement and cervical dilation will indicate if labor has begun. This is the priority nursing intervention at this time.

Optimal Decision	
<b>Scenario</b>	Nurse Darla completed a vaginal examination on Ms. Goodwin.

<b>Question</b>	Nurse Darla completed a vaginal examination on Ms. Goodwin and notified the provider of her findings. Which of the following actions is the highest priority?
<b>Selected Option</b>	Administer nifedipine (Procardia).
<b>Rationale</b>	Nifedipine relaxes smooth muscles, decreasing uterine contractions. Because the greatest risk to the client and her fetus is preterm labor, this is the priority action at this time.

<b>Optimal Decision</b>	
<b>Scenario</b>	Nurse Darla is preparing to administer betamethasone (Celestone) to Ms. Goodwin.
<b>Question</b>	Nurse Darla is preparing to administer betamethasone (Celestone) to Ms. Goodwin. Which of the following is an appropriate action for Darla to take?
<b>Selected Option</b>	Administer the medication into the ventrogluteal muscle.
<b>Rationale</b>	The nurse should administer betamethasone deep IM. Because the dose will involve injecting 2 mL of medication, the nurse should use a large muscle.

<b>Optimal Decision</b>	
<b>Scenario</b>	Nurse Darla is preparing to obtain a urine specimen from the urinary catheter.
<b>Question</b>	Nurse Darla is preparing to obtain a urine specimen from the urinary catheter after the catheter was clamped 3 inches below the collection port. Identify the sequence of steps Darla should take when performing this procedure. (Reorder the steps by dragging them into the desired sequence.)
<b>Selected Ordering</b>	Don gloves. Disinfect the port. Access the port. Unclamp the drainage tube. Withdraw the specimen.
<b>Rationale</b>	When obtaining a specimen from a urinary closed system, the nurse should don gloves, disinfect the port, access the port, unclamp the tubing, and withdraw the specimen.

<b>Optimal Decision</b>	
<b>Scenario</b>	Nurse Darla is preparing to administer ampicillin (Ampicin) to Ms. Goodwin.
<b>Question</b>	Nurse Darla is preparing to administer ampicillin (Ampicin) to Ms. Goodwin. Which of the following is an appropriate action for Darla to take?
<b>Selected Option</b>	Assess Ms. Goodwin for sensitivity to cephalosporin.
<b>Rationale</b>	Due to the risk of cross sensitivity between ampicillin and cephalosporin, the nurse should check the client's record for a history of cephalosporin sensitivities.

<b>Optimal Decision</b>	
<b>Scenario</b>	Nurse Darla and the charge nurse are discussing nifedipine (Procardia).
<b>Question</b>	Nurse Darla and the charge nurse are discussing nifedipine (Procardia). Which of the following statements by Darla indicates an understanding of the medication?
<b>Selected Option</b>	"I should assess her for facial flushing."

<b>Rationale</b>	The nurse should assess the client for facial flushing as an adverse effect of the medication.
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**Optimal Decision**

<b>Scenario</b>	Nurse Darla is planning to administer magnesium sulfate to Ms. Goodwin.
<b>Question</b>	Nurse Darla is planning to administer magnesium sulfate to Ms. Goodwin. Which of the following indicate magnesium sulfate toxicity? (Select all that apply.)
<b>Selected Ordering</b>	Respiratory rate less than 12/min Altered level of consciousness Urinary output less than 30 mL/hr
<b>Rationale</b>	Magnesium sulfate is a smooth muscle relaxant and CNS depressant that produces osmotic fluid changes within the body. A suppressed respiratory effort, absence of deep-tendon reflexes, change in consciousness, and decreased urine output indicate toxicity. Muscle rigidity is not an indication of toxicity.

**Optimal Decision**

<b>Scenario</b>	Nurse Darla is teaching Ms. Goodwin about receiving tocolytic therapy.
<b>Question</b>	Nurse Darla is teaching Ms. Goodwin about receiving tocolytic therapy. Which of the following statements by Ms. Goodwin indicates she understands the effects of the therapy?
<b>Selected Option</b>	"I may experience hot flashes throughout the day."
<b>Rationale</b>	Flushing and hot flashes are common reactions to tocolytic therapy.

**Optimal Decision**

<b>Scenario</b>	Nurse Darla is teaching Ms. Goodwin about bed rest.
<b>Question</b>	Nurse Darla is teaching Ms. Goodwin about bed rest. Which of the following potential adverse effects should Darla include in the teaching?
<b>Selected Option</b>	Thrombus formation
<b>Rationale</b>	Increased clotting and risk of thrombus formation are adverse effects of continuous bed rest and inactivity.

**Optimal Decision**

<b>Scenario</b>	Nurse Darla is teaching Ms. Goodwin about signs of true labor.
<b>Question</b>	Nurse Darla is teaching Ms. Goodwin about signs of true labor. Which of the following statements by Ms. Goodwin indicates an understanding of the teaching?
<b>Selected Option</b>	"I will experience pressure in my pelvis."
<b>Rationale</b>	During true labor, the client will experience pressure in the pelvis as the fetus enters the birth canal.

**Optimal Decision**

<b>Scenario</b>	Nurse Darla is planning care for Ms. Goodwin after Ms. Goodwin experienced a gush of fluid.
<b>Question</b>	Nurse Darla is planning care for Ms. Goodwin after Ms. Goodwin experienced a gush of fluid. Which of the following is the priority action at this time?
<b>Selected Option</b>	Evaluate the fetal heart rate.
<b>Rationale</b>	Using the ABC priority-setting framework, evaluating the fetal heart rate to determine fetal well-being is the priority action for the nurse to take after a possible rupture of membranes.

<b>Optimal Decision</b>	
<b>Scenario</b>	Nurse Darla recognizes late decelerations on the fetal monitor.
<b>Question</b>	While evaluating the heart rate of the fetus, Nurse Darla recognizes late deceleration on the fetal monitor. Identify the sequence of steps Darla should take next. (Reorder the steps by dragging them into the desired sequence.)
<b>Selected Ordering</b>	Place Ms. Goodwin in the lateral position. Increase the rate of lactated Ringer's. Assess the frequency of uterine contractions. Apply oxygen at 8 L/min via face mask.
<b>Rationale</b>	Uteroplacental insufficiency causes late decelerations. The nurse should correct the nonreassuring fetal heart tone patterns. The first action is to position the client in a lateral position to improve perfusion to the fetus. Then the nurse should increase the lactated Ringer's to increase circulating blood volume and assist with correcting hypotension. Then the nurse should assess the frequency of uterine contractions to determine the number of contraction to evaluate if the client is experiencing an excessive number of contractions. Finally, the nurse should place oxygen on the client at 8 L/min via face mask to increase oxygenation to the fetus.

<b>Optimal Decision</b>	
<b>Scenario</b>	Nurse Darla is planning care for Ms. Goodwin, who has a prolapsed cord.
<b>Question</b>	Nurse Darla is planning care for Ms. Goodwin, who has a prolapsed cord. Which of the following is the priority action for Darla to take?
<b>Selected Option</b>	Apply pressure through the vaginal canal on the presenting parts.
<b>Rationale</b>	Applying pressure through the vaginal canal on the presenting parts will help relieve pressure on the umbilical cord.

<b>Optimal Decision</b>	
<b>Scenario</b>	Nurse Lance is conducting Apgar scoring on Ms. Goodwin's newborn.
<b>Question</b>	Nurse Lance is conducting Apgar scoring on Ms. Goodwin's newborn. Which of the following is an appropriate score to assign to the newborn?
<b>Selected Option</b>	5

<b>Rationale</b>	Apgar scoring consists of heart rate, respiratory rate, muscle tone, reflex irritability, and color. The nurse assigns a score of 0 to 2 for each category 1 min and 5 min after birth. This newborn's heart rate was 120/min, which is a score of 2. The respiratory rate was slow with a weak cry, which is a score of 1. The nurse noted some flexion of the extremities for tone, which is a score of 1. The nurse noted grimacing, which is a score of 1. The newborn had generalized cyanosis, which is a score of 0. The Apgar score for this newborn totals 5 points.
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# Score Explanation and Interpretation

## Individual Performance Profile

### REASONING SCENARIO INFORMATION

Reasoning Scenario Information provides the date, time and amount of time use, along with the score earned for each attempt. The percentage of students earning a Scenario Performance of Strong, Satisfactory, or Needs Improvement is provided. In addition, the Scenario Performance for each student is provided, along with date, time, and time use for each attempt. This information is also provided for the Optimal Decision Mode if it has been enabled.

If a detrimental decision is made during a Real Life scenario, the scenario will diverge from the optimal path and potentially end prematurely, in which case an indicator will appear on the score report.

### REASONING SCENARIO PERFORMANCE SCORES

<b>Strong</b>	Exhibits optimal reasoning that results in positive outcomes in the care of clients and resolution of problems.
<b>Satisfactory</b>	Exhibits reasoning that results in mildly helpful or neutral outcomes in the care of clients and resolution of problems.
<b>Needs Improvement</b>	Exhibits reasoning that results in harmful or detrimental outcomes in the care of clients and resolution of problems.

### REASONING SCENARIO PERFORMANCE RELATED TO NURSING COMPETENCY OUTCOMES

A performance indicator is provided for each outcome listed within the nursing competency outcome categories. Percentages are based on the number of questions answered correctly out of the total number of questions that were assigned to the given outcome. Outcomes have varying numbers of questions assigned to them. Also, due to divergent paths within the branching simulation, the outcomes encountered and the number of questions for each outcome can vary. The above factors cause limitations related to comparing scores across students or groups of students.

### NCLEX® CLIENT NEED CATEGORIES

<b>Management of Care</b>	Providing integrated, cost-effective care to clients by coordinating, supervising, and/or collaborating with members of the multi-disciplinary health care team.
<b>Safety and Infection Control</b>	Incorporating preventative safety measures in the provision of client care that provides for the health and well-being of clients, significant others, and members of the health care team.
<b>Health Promotion and Maintenance</b>	Providing and directing nursing care that encourages prevention and early detection of illness, as well as the promotion of health.
<b>Psychosocial Integrity</b>	Promoting mental, emotional, and social well-being of clients and significant others through the provision of nursing care.
<b>Basic Care and Comfort</b>	Promoting comfort while helping clients perform activities of daily living.
<b>Pharmacological and Parenteral Therapies</b>	Providing and directing administration of medication, including parenteral therapy.
<b>Reduction of Risk Potential</b>	Providing nursing care that decreases the risk of clients developing health-related complications.
<b>Physiological Adaptation</b>	Providing and directing nursing care for clients experiencing physical illness.

# Score Explanation and Interpretation

## Individual Performance Profile

### QUALITY AND SAFETY EDUCATION FOR NURSES (QSEN)

<b>Safety</b>	The minimization of risk factors that could cause injury or harm while promoting quality care and maintaining a secure environment for clients, self, and others.
<b>Patient-Centered Care</b>	The provision of caring and compassionate, culturally sensitive care that is based on a client's physiological, psychological, sociological, spiritual, and cultural needs, preferences, and values.
<b>Evidence Based Practice</b>	The use of current knowledge from research and other credible sources, upon which clinical judgment and client care are based.
<b>Informatics</b>	The use of information technology as a communication and information gathering tool that supports clinical decision making and scientifically based nursing practice.
<b>Quality Improvement</b>	Care related and organizational processes that involve the development and implementation of a plan to improve health care services and better meet the needs of clients.
<b>Teamwork and Collaboration</b>	The delivery of client care in partnership with multidisciplinary members of the health care team, to achieve continuity of care and positive client outcomes.

### BODY FUNCTION

<b>Cardiac Output and Tissue Perfusion</b>	The anatomical structures (heart, blood vessels, and blood) and body functions that support adequate cardiac output and perfusion of body tissues.
<b>Cognition and Sensation</b>	The anatomical structures (brain, central and peripheral nervous systems, eyes and ears) and body functions that support perception, interpretation, and response to internal and external stimuli.
<b>Excretion</b>	The anatomical structures (kidney, ureters, and bladder) and body functions that support filtration and excretion of liquid wastes, regulate fluid and electrolyte and acid-base balance.
<b>Immunity</b>	The anatomic structures (spleen, thymus, bone marrow, and lymphatic system) and body functions related to inflammation, immunity, and cell growth.
<b>Ingestion, Digestion, Absorption, and Elimination</b>	The anatomical structures (mouth, esophagus, stomach, gall bladder, liver, small and large bowel, and rectum) and body functions that support ingestion, digestion, and absorption of food and elimination of solid wastes from the body.
<b>Integument</b>	The anatomical structures (skin, hair, and nails) and body functions related to protecting the inner organs from the external environment and injury.
<b>Mobility</b>	The anatomical structures (bones, joints, and muscles) and body functions that support the body and provide its movement.
<b>Oxygenation</b>	The anatomical structures (nose, pharynx, larynx, trachea, and lungs) and body functions that support adequate oxygenation of tissues and removal of carbon dioxide.
<b>Regulation and Metabolism</b>	The anatomical structures (pituitary, thyroid, parathyroid, pancreas, and adrenal glands) and body functions that regulate the body's internal environment.
<b>Reproduction</b>	The anatomical structures (breasts, ovaries, fallopian tubes, uterus, vagina, vulva, testicles, prostate, scrotum, and penis) and body functions that support reproductive functions.

### DECISION LOG

Information related to each question answered in a scenario attempt is listed in the report. A brief description of the scenario, question, selected option and rationale for that option are provided for each question answered. The words "Optimal Decision" appear next to the question when the most optimal option was selected.

The rationale for each selected option may be used to guide remediation. A variety of learning resources may be used in the review process, including related ATI Review Modules.

If a detrimental decision that could result in grave harm to the client is made during a Real Life scenario, the scenario ends immediately and an indicator that a detrimental decision has been made appears in the score report. A detrimental decision indicates the need to remediate the related topic area to prevent detrimental outcomes in the future.