Lakeview College of Nursing

N432 Maternal Newborn Care

Clinic Observation Expectations

Reflective Journaling Assignment

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The nonstress test (NST) is a technique for determining the fetal heart rate (FHR). The uterine contractions are recorded on one receiver, while the fetal heart rate is recorded on the other. One receiver is placed towards the top of the uterus, while the other is placed near the fetus's chest. Straps are moderately attached to the mother's waist and belly to keep both receivers in position. This test is utilized for high-risk pregnancies, and it is frequently used on moms who have been diagnosed with hypertension, gestational diabetes, and other medical conditions (Nonstress Test, 2021). The nurse's role is to ensure that the receivers are appropriately placed on the mother and that two accelerations are observed within twenty minutes. All findings are also reported to the physician by the nurse. The nurse may need to replace the receiver from time to time to get a good reading. The nurses had to replace the receiver a few times since the baby was moving.

The scenario has an impact on the parents, children, and other family members since they are concerned for the baby's well-being. During the NST test, the nurse was efficient. The nurse would palpate the mother's stomach to feel where the baby's body was before inserting the receivers. She next performed a more focused palpation on the baby's head and chest. Once the position of their torso was determined, the suitable receiver was positioned at the same spot as their torso. The other receiver was positioned near the uterus's apex. The plan was to leave the patient alone for 20 to 25 minutes while the nurse monitored telemetry from the observation room.

Another patient's NST was displayed on the monitor, which was flanked by two more patients on another monitor. The nurses had a full morning ahead of them. The fetal heart rate wave displayed gaps on the monitor after about five minutes. The nurse said that the baby had moved out of range during palpation and that she could feel how active the baby was. She went back to the patient and palpated her stomach once more. She moved the receiver after feeling

the head and chest. After another five minutes, the gaps reappeared. The nurse stated that there are several strategies to employ for evasive children. The baby's back is a promising area for FHR. The other approach, she added, takes advantage of ultrasounds by placing the pad on the opposite symmetrical side of the belly, where the FHR soundwaves may still be read. She began palpating for a broad and smooth-feeling area, as the first method is more trustworthy. The baby's back is on that surface. She felt the back and positioned the pad where it needed to be.

The nurse informed the patient at the conclusion of the test that she would need to return in two days for another NST. The test's parameters were not met, so it was a nonreactive test. The nurse also advised that the diabetic diet be followed. Vegetables, fruit, and grains were recommended as healthy foods (Diabetes diet, 2021).

## REFERENCES

Mayo Clinic (2021). *Diabetes diet: Create your healthy-eating plan*. https://www.mayoclinic.org/diseases-conditions/diabetes/in-depth/diabetes-diet/art-200442951

Mayo Clinic (2021). *Nonstress Test*. https://www.mayoclinic.org/tests-procedures/nonstress-test/about/pac-20384577?p=1