

N432 NEWBORN CARE PLAN

N432 Newborn Care Plan

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Demographics (10 points)

Date & Time of Clinical Assessment 10/03/22 1009	Patient Initials A.C.	Date & Time of Birth 10/03/22	Age (in hours at the time of assessment) 1
Gender Female	Weight at Birth (gm) ___3270 grams___ (lb.) _7_ (oz.) _3.3_	Weight at Time of Assessment (gm) ___3270 g.____ (lb.) _7_ (oz.) _3.3_	Age (in hours) at the Time of Last Weight 1
Race/Ethnicity White/African American	Length at Birth Cm ___49.5 cm___ Inches _19.49 inches___	Head Circumference at Birth Cm ___35 cm___ Inches _13.78 inches___	Chest Circumference at Birth Cm ___33 cm___ Inches _12.99 (13)inches_

There are times when the weight at the time of your assessment will be the same as birth

Mother/Family Medical History (15 Points)

Prenatal History of the Mother:

GTPAL: Before birth: G2T0P1A0L1 Now:G2T1P1A0L2

When prenatal care started: Prenatal care started on 3/09/22.

Abnormal prenatal labs/diagnostics: N/a

Prenatal complications: Previous history of preterm birth.

Smoking/alcohol/drug use in pregnancy: None

Labor History of Mother:

Gestation at onset of labor: 39 weeks and 0 days

Length of labor: Scheduled C - section

ROM: 10/03 at 0821

Medications in labor: Bupivacaine 0.75% (Spinal) - Intrathecal on 10/03/22 at 0749.

Duramorph 1 mg/1 mL - Intracal , 200 mcg on 10/03/22 at 7:49.

Complications of labor and delivery: None

Family History: Hypertension in mother and father.

Pertinent to infant: Hypertension can affect the size of the baby.

Social History (tobacco/alcohol/drugs): Former smoker. Unknown packs/day/year.

Pertinent to infant: Smoking can increase chances of bleeding during pregnancy.

Father/Co-Parent of Baby Involvement: Father is involved in life.

Living Situation: Lives with partner.

Education Level of Parents (If applicable to parents' learning barriers or care of infant):

N/a

Birth History (10 points)

Length of Second Stage of Labor: Unknown

Type of Delivery: C-section

Complications of Birth: None

APGAR Scores:

1 minute: 9

5 minutes: 9

Resuscitation methods beyond the normal needed:

Feeding Techniques (10 points)

Feeding Technique Type: Breastfeeding

If breastfeeding:

LATCH score: 8

Supplemental feeding system or nipple shield: Not included in the lactation report.

N/a

If bottle feeding: N/a

Positioning of bottle: N/a

Suck strength: Not included in the lactation report. N/a.

Amount: N/a

Percentage of weight loss at time of assessment: ___8___%

$3270-3000=270 \rightarrow 270/3270g. =0.0825 \times 100=8\%$

****Show your calculations; if today's weight is not available, please show how you would calculate weight loss (i.e. show the formula)****

What is normal weight loss for an infant of this age? 7-10%

Is this neonate's weight loss within normal limits? Yes

Intake and Output (8 points)

Intake

If breastfeeding:

Feeding frequency: Not included in lactation report. N/a.

Length of feeding session: Not included in lactation report. N/a.

One or both breasts: Both breasts.

If bottle feeding:

Formula type or Expressed breast milk (EBM): N/a

Frequency: N/a

Volume of formula/EBM per session: N/a

If EBM, is fortifier added/to bring it to which calorie content: N/a

If NG or OG feeding: N/a

Frequency: N/a

Volume: N/a

If IV:

Rate of flow: N/a

Volume in 24 hours: N/a

Output

Void

Age (in hours) of first void: N/a

Number of voids in 24 hours: N/a

Stool

Age (in hours) of first stool: N/a

Type: N/a

Color: N/a

Consistency: N/a

Number of times in 24 hours:

Laboratory Data and Diagnostic Tests (15 points)

Highlight All Abnormal Labs—Explanations must be in complete sentences and contain in-text citations in APA format.

Name of Test	Why is this test ordered for any infant?	Expected Results	Client's Results	Interpretation of Results
Blood Glucose Levels		N/a	N/a	N/a
Blood Type and Rh Factor		N/a	N/a	N/a
Coombs Test		N/a	N/a	N/a

Bilirubin Level (All babies at 24 hours) *Utilize bilitool.org for bilirubin levels*		N/a	N/a	N/a
Newborn Screen (At 24 hours)		N/a	Results will not be available.	N/a
Newborn Hearing Screen		N/a	N/a	N/a
Newborn Cardiac Screen (At 24 hours)		N/a	N/a	N/a

Lab Data and Diagnostics Reference (1) (APA):

Newborn Medications (7 points)

Brand/Generic	Aquamephyton (Vitamin K)	Illotycin (Erythromycin Ointment)	Hepatitis B Vaccine		
Dose	1 mg	0.5%	0.5 mL		
Frequency	Once	Once	Once		
Route	Intramuscular	Both eyes	Intramuscular		
Classification		Pharmacologic class: Macrolide Therapeutic class: Antibiotic			
Mechanism of Action		Binds with the 50S ribosomal subunit of the 70S ribosome in many types of aerobic, anaerobic, gram- negative, and gram-positive. This action inhibits RNA- dependent protein			

		synthesis in bacterial cells, causing them to die.			
Reason Client Taking		Client is taking to help prevent an eye infection.			
Contraindications (2)		Hypersensitivity to erythromycin.			
Side Effects/Adverse Reactions (2)		Side effects include fatigue and hearing loss.			
Nursing Considerations (2)					
Key Nursing Assessment(s)/Lab(s) Prior to Administration					
Client Teaching needs (2)					

Medications Reference (1) (APA):

Newborn Assessment (20 points)

Area	Your Assessment	Expected Variations and Findings *This can be found in your book on page 622 in Ricci, Kyle, & Carman 4th ed 2021.
Skin	Acrocyanotic, mongolian spot over buttocks. Stork bite.	Smooth, flexible, good skin turgor, well hydrated, and warm (Ricci et al., 2021).
Head	Head is normocephalic. No bruising or lacerations.	Varies with age, gender, and ethnicity.
Fontanel	Anterior fontanel is soft and flat.	The anterior and posterior fontanel should be flat and soft.
Face	All facial features are symmetric.	Full cheeks, facial features symmetric (Ricci et al., 2021).
Eyes	Pupils are equal, round, and reactive to light. Red reflex present bilaterally.	Clear and symmetrically on face; on line with ears (Ricci et al., 2021).
Nose	Externally normal, nares without obvious obstruction.	Small, placement in the midline and narrow, ability to smell (Ricci et al., 2021).
Mouth	Mouth is aligned midline. Mouth is symmetrical to the head and face. Hard and soft palate intact.	Aligned midline, symmetric, intact soft and hard palate (Ricci et al., 2021).
Ears	Ear canal appears patent, pinnar normal, no pits or tags.	Soft and pliable with quick recoil when folded and released (Ricci et al., 2021).
Neck	Neck is symmetric. No masses observed. Baby holds head midline.	Short, creased, moves freely. Baby holds head midline (Ricci et al., 2021).
Chest	Chest wall is symmetric and round.	Round, symmetric, and smaller than head (Ricci et al., 2021).
Breath Sounds	Lungs clear to auscultation with equal breath sounds bilaterally. No rales, no wheezing, no retractions, no	Lung sounds should be clear bilaterally. No wheezes, stridors, or retractions. There should be no signs of respiratory distress (Ricci

	stridor, and no cough.	et al., 2021).
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Heart Sounds	Regular rate and rhythm. No murmur.	Normal heart rate, rhythm, regularity, normal heart sounds, and no murmurs (Ricci et al., 2021).	
Abdomen	Soft, non-tender, umbilicus and 3-vessel cord. No abdominal masses palpable.	Protuberant contour, soft, three vessels in umbilical cord (Ricci et al., 2021).	
Bowel Sounds	Bowel sounds are active in all 4 quadrants.	Normoactive bowel sounds in all 4 quadrants (Ricci et al., 2021).	
Umbilical Cord	All 3 vessels are present in the umbilical cord.	Three vessels in the umbilical cord (Ricci et al., 2021).	
Genitals	Normal female anatomy.	Swollen female genitals as a result of maternal estrogen (Ricci et al., 2021).	
Anus	Patent opening of anus.	Patent opening of anus (Ricci et al., 2021).	
Extremities	Symmetrical extremities that have free range of motion.	Extremities are symmetric with free movement (Ricci et al., 2021).	
Spine	Spine is symmetrical.	Spine is symmetrical (Ricci et al., 2021).	
Safety <ul style="list-style-type: none"> ● Matching ID bands with parents ● Hugs tag ● Sleep position 	Newborn has matching ID bands with Mom and Dad. Newborn wears two separate hugs tags. Newborn sleeps on back.	Newborn has matching ID bands with Mom and Dad. Infant wears two separate hugs tags. Newborn sleeps on back.	

Resource:

Ricci, S. S., Kyle, T., & Carman, S. (2021). *Maternity and pediatric nursing* (4th ed.). Wolters Kluwer.

Vital Signs, 3 sets (6 points)

Time	Temperature	Pulse	Respirations
Birth	99.1 F (37.3 C)	152	60
4 Hours After Birth	N/a (Was not at facility at this time)	N/a	N/a
At the Time of Your Assessment	98.8 F (37.1 C)	156	50

Vital Sign Trends: There are only two sets of vital signs. The trends consist of a decrease in temperature, an increase in pulse, and a decrease in respirations.

Pain Assessment, 1 set (2 points)

Time	Scale	Location	Severity	Characteristics	Interventions
1045	NIPS	N/a	0	No cry, relaxed	Pain goal met

Summary of Assessment (4 points)

Discuss the clinical significance of the findings from your physical assessment:

****See the example below****

This neonate was delivered on 5.15.14 at 0522 by normal spontaneous vaginal delivery (NSVD). The nuchal cord was around the neck x1. The Apgar scores were 1/3/9. The EDD was 5/10/14 by US. The new Ballard scale assessment revealed neonate is 39 2/7 weeks and LGA. The prenatal

history shows this pregnancy was complicated by PIH and GDM (diet controlled). The birth weight was 9 lbs 4 ozs (4440 grams); length was 21” (53.34 cms); head circumference was 13” (33 cms); and chest circumference was 12” (30.5 cms). Upon assessment all systems are within normal limits. The last set of vitals was: 38.4/155/48. Breath sounds x3 after delivery were WNL with the lowest being 52. The neonate is breastfeeding and nursing well with most feedings 20”/20” q2-3 hrs. The bilirubin level at 24 hours per scan was 4.9. The neonate is expected to be discharged with mother later today and to see the pediatrician in the office for first well baby check within 48 hours.

Nursing Interventions and Medical Treatments for the Newborn (6 points)

Nursing Interventions and Medical Treatments (Identify nursing interventions with “N” after you list them, identify medical treatments with “M” after you list them.)	Frequency	Why was this intervention/ treatment provided to this patient? Please give a short rationale.

Discharge Planning (2 points)

Discharge location: Home

Equipment needs (if applicable): N/a

Follow up plan (include plan for newborn ONLY): Newborn should be breastfed and should have daily checkups with their pediatrician.

Education needs: Teach mother the importance of continuing to breastfeed and to attend her pediatrician appointments. Teach the father to be involved with the daily care of the baby.

Nursing Diagnosis (30 points)

Must be NANDA approved nursing diagnosis and listed in order of priority

Two of the Nursing Diagnoses must be education related i.e. the interventions must be education for the client.”

2 points for correct priority

<p>Nursing Diagnosis (2 pt each) Identify problems that are specific to this patient. Include full nursing diagnosis with “related to” and “as evidenced by” components</p>	<p>Rational (1 pt each) Explain why the nursing diagnosis was chosen</p>	<p>Intervention/Rational (2 per dx) (1 pt each) Interventions should be specific and individualized for his patient. Be sure to include a time interval such as Assess vital signs q 12 hours.” List a rationale for each intervention and using APA format, cite the source for your rationale.</p>	<p>Evaluation (2 pts each)</p> <ul style="list-style-type: none"> ● How did the patient/family respond to the nurse’s actions? ● Client response, status of goals and outcomes, modifications to plan.
<p>1. Risk for hyperthermia related to cesarean delivery as evidenced by skin cold to touch.</p>	<p>This nursing diagnosis was chosen because hypothermia is always an important risk factor for any newborn that could be life-threatening.</p>	<p>1. Warm the patient immediately after birth and allow skin-to-skin contact. Rationale: Warming a cold baby with skin-to-skin contact is very effective and helps prevent heat loss (Jones & Bartlett, 2022).</p> <p>2. Provide immediate drying after birth. Rationale: Providing immediate drying after birth can help with reducing heat loss from evaporation (Jones & Bartlett,</p>	<p>The patient and family responded very well during the nursing interventions. The baby was kept under the heater and warmed. The father got to experience skin-to-skin contact with the baby which helped build a bond. Drying the baby immediately after helped with reducing heat loss from the baby. All goals were met from the nursing interventions and no modifications were needed for the plan.</p>

		2022).	
2.		1. Rationale	
3.		2. Rationale	
4.		1. Rationale	
		2. Rationale	

Other References (APA):

Jones & Bartlett Learning. (2022). *2022 Nurse’s drug handbook* (19th ed.). Jones & Bartlett Learning