

N432 Newborn Care Plan

Destiny Bell

Lakeview College of Nursing

N432: Maternal-Newborn Care

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Demographics (10 points)

<u>Date & Time of Clinical Assessment</u> 7/06/23 at 0800	<u>Patient Initials</u> M.W	<u>Date & Time of Birth</u> 7/05/23 at 2258	<u>Age (in hours at the time of assessment)</u> 10 hours old
<u>Gender</u> Male	<u>Weight at Birth</u> (gm) <u>4020</u> (lb.) <u>8</u> (oz.) <u>13.8</u>	<u>Weight at Time of Assessment</u> (gm) <u>4020</u> (lb.) <u>8</u> (oz.) <u>13.8</u>	<u>Age (in hours) at the Time of Last Weight</u> 0 HOURS, 10 MINUTES
<u>Race/Ethnicity</u> Caucasian	<u>Length at Birth</u> Cm <u>53.3</u> Inches <u>21</u>	<u>Head Circumference at Birth</u> Cm <u>36</u> Inches <u>14.17</u>	<u>Chest Circumference at Birth</u> Cm <u>36</u> Inches <u>14.17</u>

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: G3P3003

When prenatal care started:

Abnormal prenatal labs/diagnostics: N/A

Prenatal complications: None

Smoking/alcohol/drug use in pregnancy: None reported

Labor History of Mother:

Gestation at onset of labor: 40 weeks, 1 day

Length of labor: 5 hours, 2 minutes

ROM: Spontaneous, induced

Medications in labor:

Complications in labor and delivery: None

Family History Pertinent to infant: N/A; None

Social History (tobacco/alcohol/drugs) Pertinent to infant: Mother denies any tobacco, alcohol, or drug use.

Father/Co-Parent of Baby Involvement: yes

Living Situation of Family: Patient will be living at home with both mom and dad as well as his two older brothers.

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

Highschool diploma

Birth History (10 points)

Length of Second Stage of Labor: 0 hours, 10 minutes

Type of Delivery: induced, vaginal delivery

Complications During Birth: None

APGAR Scores:

1 minute: 8

5 minutes: 8

Resuscitation methods beyond the normal needed: N/A

Intake and Output (18 points)

Intake

If breastfeeding:

Feeding frequency: Every 2-3 hours

Length of feeding session: 20 minutes

One or both breasts: Both; alternates sides approximately 10 minutes on each side

If bottle feeding:

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

Frequency: N/A

Volume of formula/EBM per session: N/A

Output

Void

Age (in hours) of first void: N/A; Patient has not voided yet

Number of voids in 24 hours: N/A

Stool

Age (in hours) of first stool: 0 hours, 22 minutes

Type: loose

Color: dark brown

Number of times in 24 hours: 3

Percentage of weight loss at time of assessment: 0 %

****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? Less than 10%

Is this neonate's weight loss within normal limits? N/A; Patient did not have any weight loss

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	60-99 mg/dL	N/A	Blood Glucose levels were not ordered and obtained
Blood Type and Rh Factor	Type and cross; ensure the Rh factor of the mother won't harm the baby (Pagana et al., 2018).	Results vary; Rh negative or Rh positive	N/A	Blood type and Rh Factor has not been obtained yet
Coombs Test	N/A	Negative	N/A	Coombs test was not obtained
Bilirubin Level (All babies at 24 hours) *Utilize bilitool.org for bilirubin levels*	To assess for jaundice	1-15 mg/dL	1.3	Clients bilirubin is within normal limits
Newborn Screen (At 24 hours)	Routine screening to detect any defects (Pagana et al., 2018).	N/A	Results will not be available.	Newborn screen was not obtained yet.
Newborn Hearing Screen	Routine screening to detect possible hearing loss (Pagana et al., 2018).	N/A	N/A	Newborn hearing screen was not performed yet
Newborn Cardiac Screen (At 24 hours)	Routine screening to detect any abnormalities	N/A	N/A	Newborn cardiac screen was not

	Negative Passed No impairments noted during screening before discharge (Pagana et al., 2018).			performed yet
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Lab Data and Diagnostics Reference (1) (APA):

Pagana, K.D. & Pagana T.J. (2018) *Mosby's Diagnostic and Laboratory Test Reference* (6th ed.). Mosby.

Newborn Medications (10 points)

Contain in-text citations in APA format.

Brand/Generic	Aquamephyton (Vitamin K)	Illotycin (Erythromycin Ointment)	Hepatitis B Vaccine		
Dose	1mg	5mg/gram 0.5%	10 mcg/0.5 mL		
Frequency	One-time	One time	One time		
Route	IM injection	Ophthalmic; ointment to both eyes	IM Injection		
Classification	Vitamin replacement	Antibiotic	Vaccination		
Mechanism of Action	Aids in improving the clotting factor in preventing a possible hemorrhage (Jones & Bartlett Learning, 2022).	Helps to prevent infection in the eyes after birth (Jones & Bartlett learning, 2022).	Aids the newborn in building antibodies to help prevent disease (Jones & Bartlett Learning, 2022).		
Reason Client Taking	Clotting factor	Prevention of conjunctivitis	Build immunity/routine vaccine		
Contraindications (2)	Hypersensitivity to vitamin K; Renal impairment (Jones & Bartlett Learning, 2022).	Hypersensitivity to erythromycin or its components; Hypersensitivity to Illotycin	Hypersensitivity to yeast; Anaphylaxis Shock (Jones & Bartlett Learning, 2022).		

		(Jones & Bartlett Learning, 2022).			
Side Effects/Adverse Reactions (2)	Hyperbilirubinemia & rash (Jones & Bartlett Learning, 2022).	Stinging or a burning sensation (Jones & Bartlett Learning, 2022).	Soreness and discomfort (Jones & Bartlett Learning, 2022).		
Nursing Considerations (2)	Medication should be given 1 to 2 hours after birth and should be delivered via IM injection into the vastus lateralis (Jones & Bartlett Learning, 2022).	Observe for signs of hepatic impairment. Avoid touching or rubbing ointment off eyes (Jones & Bartlett Learning, 2022).	Rotate injection sites and cleanse the area thoroughly before injection (Jones & Bartlett Learning, 2022).		
Key Nursing Assessment(s)/Lab(s) Prior to Administration	Check dosages before administering (Jones & Bartlett Learning, 2022).	Apply the drops directly into the inner corner of the eye (Jones & Bartlett Learning, 2022).	Have a second nurse double-check and verify the dosage of the vaccine prior to administration (Jones & Bartlett Learning, 2022).		
Client Teaching needs (2)	Provide comfort After administration. Report any abnormalities or changes in status after administration of medication (Jones & Bartlett Learning, 2022).	Explain the purpose of the medication to parents before administration. Educate parents on the potential side effects of medication (Jones & Bartlett Learning, 2022).	Breastfeed the patient after the vaccination as a comfort measure. Swaddle the patient after the vaccination is administered as a comfort measure (Jones & Bartlett Learning, 2022).		

Medications Reference (1) (APA):

Jones & Bartlett Learning (2022). *2022 Nurse's Drug Handbook (19th ed.)*. Jones and Bartlett Learning.

Newborn Assessment (20 points)

Area	Your Assessment	Expected Variations and Findings <i>*This can be found in your book on page 622 in Ricci, Kyle, & Carman 4th ed 2021.</i>
Skin	Skin is pink, warm, dry and intact with no signs of rashes or bruises present.	The skin should be smooth and flexible, have good skin turgor, be well hydrated, and be warm upon touch. Variations include the presence of jaundice, acrocyanosis, milia, Mongolian spots, and stork bites (Ricci et al., 2021).
Head	Head is normocephalic, symmetrical with no signs of abnormalities	Findings will vary based on age, gender, and ethnicity. Soft fontanels should have a head circumference of 33-37 cm. Variations include microcephaly, macrocephaly, and enlarged fontanels (Ricci et al., 2021).
Fontanels	Fontanels are soft and palpable; suture lines are palpable and overriding.	Typical findings are open, soft, and flat. Variations include enlarged fontanels (Ricci et al., 2021).
Face	Face is symmetrical at rest and with movement, no noted abnormalities.	Face findings include full cheeks, and all facial features are symmetrical. Variations include facial nerve paralysis, nevus flammeus, and nevus vasculosus (Ricci et al., 2021).
Eyes	Sclera are clear, open and close independently, symmetrical. Pupils are equal, round and reactive to light.	Typical findings include symmetrical eyes, free of drainage, clear sclera, and ear alignment. Variations include chemical conjunctivitis and subconjunctival hemorrhages (Ricci et al., 2021).
Nose	Midline and symmetrical, nostrils are patent with no noted congestion or drainage.	Usual findings include a midline position, a narrow nose, and the ability to smell. Variations include malformation or blockage (Ricci et al., 2021).
Mouth	Lips, gums, and oral mucosa are pink and moist. The tongue is in normal position and palate is intact. No abnormalities noted.	Characteristic findings should include the tongue being midline, symmetrical, and intact soft and hard palate. Variations include Epstein

		pearls, erupted precocious teeth, and candidiasis thrush (Ricci et al., 2021).
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Ears	Ears are symmetrical with the eyes	Characteristic findings quickly recoil when folded and released, and the ears should be soft upon palpation. Variations include low-set ears and hearing deficit or loss (Ricci et al., 2021).
Neck	Moves head and neck without difficulty. Neck is symmetrical with the head, there are no noted abnormalities.	Characteristic findings include the neck moving freely and the baby holding their head in a midline position (if possible). Variations include restricted movements with palpable masses noted (Ricci et al., 2021).
Chest	Symmetrical rises & falls, no retractions in breathing noted. respiratory status is equal and clear throughout. Chest circumference is 36cm.	Typical findings of the chest are round, symmetric, and smaller than the infant's head. An average chest circumference is between 30- 33 cm. Variations include nipple engorgement with abnormal discharge (Ricci et al., 2021).
Breath Sounds	Lung sounds are clear and equal bilaterally throughout. Lung expansion is symmetrical, with no noted retractions or labored breathing.	Usual findings include clear and equal sounds in all lobes, unlabored breathing, and a respiration rate of 30-60 breaths per minute. Variations include the presence of crackles, wheezes, and respirations lower than 30 or greater than 60 (Ricci et al., 2021).
Heart Sounds	Heart is in a regular rate and rhythm. S1 and s2 present with no murmurs noted, PMI in the mid left sternal.	Usual findings are murmurs that resolve independently, S1 and S2 sounds, regular rhythm, and a heart rate of 110-160 beats per minute. Variations include notable S3 or S4 sounds and a heart rate of less than 110 or greater than 160 (Ricci et al., 2021).
Abdomen	Soft, non-tender upon palpation. Non-distended and no masses noted. Umbilical cord is intact with no noted bleeding.	The characteristic findings are a protuberant contour, softness, and three vessels in the umbilical cord. Variations include distention and two umbilical cord vessels (Ricci et al., 2021).

Bowel Sounds	Normoactive throughout all quads.	Typical findings are bowel sounds being active in all four quadrants with 10-30 bowel sounds per minute. Variations include hyperactive or hypoactive bowel sounds (Ricci et al., 2021).
Umbilical Cord	Intact, no discoloration or bleeding noted. Cord clamp intact.	Typical findings are seeing three vessels in the umbilical cord and the appearance being a pale-yellow color. Variations include seeing two vessels in the umbilical cord (Ricci et al., 2021).
Genitals	Did not assess	Typical findings in male genitals include normal placement of the urinary meatus on the glans penis. Variations include hypospadias, phimosis, and paraphimosis (Ricci et al., 2021).
Anus	Did not assess	Typical findings of the anus include the passing of stool with a normal appearance and position. Variations include being enlarged/swollen and having the presence of fistulas (Ricci et al., 2021).
Extremities	Moves symmetrically and without difficulty. Strength is great 3+ in all quadrants. Extremities are warm and dry.	Usual findings in the extremities include them being symmetric bilaterally with free movement. Variations are congenital hip dislocation (Ricci et al., 2021).
Spine	Midline with no noted curvatures. No abnormalities noted and flexible when turned.	Typical findings are straight, flat, and flexible. Variations include tufted or dimple in spine (Ricci et al., 2021).
Safety <ul style="list-style-type: none"> • Matching ID bands with parents • Hugs tag • Sleep position 	Wristband matches parent. Hugs tag observed on baby. Baby is sleeping supine in the bassinet.	Typical findings are matching ID bands with parents, hugs tags are in place, and positioned supine. Variations include the hugs band being attached to the bed (Ricci et al., 2021).

Vital Signs, 3 sets (6 points)

Time	Temperature	Pulse	Respirations
Birth	99.0 axillary	136 bpm	63 breaths per min
4 Hours After Birth	99.3 axillary	126 bpm	30 breaths per min
At the Time of Your Assessment	98.2 axillary	128 bpm	28 breaths per min

Vital Sign Trends: No trends noted, vitals are within normal limits.

Pain Assessment, 1 set (2 points)

Time	Scale	Location	Severity	Characteristics	Interventions
0800	FLACC	N/A	0	N/A	N/A

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.
Encouragement of breastfeeding. (N)	1-2 HOURS	It is important to encourage breastfeeding and proper latch attachment and feeding positions for the baby to ensure proper nutrition.
Comfort measures (N)	Daily	Swaddling the newborn to enhance comfort. Skin-to-skin as much as possible with baby for both parents.
Post- vaccine care (M)	After each vaccination	It is important to provide care and comfort to the patient following each vaccination, one way to achieve to this is through breastfeeding.

Breastfeeding education (M)	Daily	Providing mom with proper education on breastfeeding and bringing in the lactation consultant will help ensure proper nutrition.

Discharge Planning (3 points)

Discharge location: Discharge home with mom and dad.

Follow up plan (include plan for newborn ONLY): Follow up with pediatrician post-discharge, routine well-child visits, maintain vaccination schedule.

Education needs: the importance of keeping vaccine schedules, breast & bottle feeding, safe sleeping, keeping track of baby's intake and output

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

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	Rational (1 pt each) Explain why the nursing diagnosis was chosen	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.	Evaluation (2 pts each) <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.
1. Risk for infection related to inadequate acquired	Newborns have immature immune systems that	1.encourage breastfeeding Rationale: breastfeeding can help the newborn acquire passive immunity through the mother's	Parents verbalized two infection prevention measures. Parents will demonstrate a

immunity as evidenced by an immature immune system.	are unable to protect them against pathogens for the first months of life.	breastmilk (Phelps, 2020) 2.proper hand hygiene Rationale: hand washing is needed to protect against illnesses (Phelps, 2020)	protective environment for the newborn Patient will remain free from infection.
2. Risk for altered body temperature related to immature temperature control as evidenced by alterations in temperature.	Newborns are unable to regulate their temperature, so it is important to keep them warm.	1. encourage swaddling Rationale Swaddling not only provides comfort but helps keep the baby warm 2.Teach the parents about techniques to ensure their newborn is comfortable and warm Rationale; teaching the parents proper	Parents verbalized understanding of swaddling to promote warmth. Parents will demonstrate a knowledge in how they can promote adequate temperature control for the newborn. Patient will maintain a normal temperature
3. Risk for increased bilirubin level related to mom's diagnosis of carrier E as evidenced by multiple bilirubin lab draws ordered	The patient is at an increased risk for having elevated bilirubin levels due to mom's condition	1. Monitor levels Rationale Labs are ordered to track the patient's levels to ensure he stays in range 2. Provide sunlight Rationale; Sunlight during feeding sessions will help to level out the patient's bilirubin level if it becomes elevated	Parents provided breastfeeding sessions in the sunlight through the hospital window. Patient's labs were obtained as ordered Patient levels stayed within normal range.
4.		1. Rationale 2. Rationale	

Other References (APA):

Phelps, L.L. (2020). *In Spark's & Taylor's Nursing Diagnosis Reference Manual (11th ed.)*

Essay. Wolters Kluwer.

Ricci, S., Ricci, S. S., Kyle, T., Kyle, T., & Carman, S. (2020). *Maternity and Pediatric Nursing.*

LWW.