N432 Newborn Care Plan

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N432: Maternal-Newborn Care

Professor Bohlen

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Demographics (10 points)

Date & Time of Clinical Assessment 10/5/23 @ 08830	**Patient Initials** B.G.W	**Date & Time of Birth** 10/5/23 @ 0634	**Age (in hours at the time of assessment)** Two hours
Gender Female	**Weight at Birth** **(gm) __**2980**__** **(lb.) __**6**___ (oz.) __**9.1 **_**	**Weight at Time of Assessment** **(gm) ___**At birth (2980) **(lb.) _**6**____ (oz.) __**9.1**___**	**Age (in hours) at the Time of Last Weight** At birth
Race/Ethnicity African American	**Length at Birth** **Cm _____**47**_____** **Inches _____**18.5**_____**	**Head Circumference at Birth** **Cm _____**34.5**_____** **Inches _____**13.6**_____**	**Chest Circumference at Birth** **Cm ___**31 **_____** **Inches ____**12.2**_____**

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: G: 4 **T:** 4 **P:** 0 **A:** 0 **L:** 4

When prenatal care started: May 2023 at approximately 20 weeks.

Abnormal prenatal labs/diagnostics: Increased: WBC and Neutrophils & Decreased: Hgb, MCV, MCH. (+) for cannabinoids.

Prenatal complications: Intrauterine growth restriction (IUGR), Marginal cord insertion

Smoking/alcohol/drug use in pregnancy: No alcohol or tobacco use. The patient smoked cannabis every other day throughout her whole pregnancy**.**

Labor History of Mother: First birth seven years ago with no pregnancy complications, then another birth five years ago with no complications, and then a birth two years ago with no complications.

Gestation at onset of labor: 39 weeks, 1 day

Length of labor: Approximately nine hours

ROM: Happened on 10/5/23 at 0608. Fluid was clear and non-smelling.

Medications in labor: Ondansetron, Lactated ringers, Ropivacaine, and Pitocin

Complications in labor and delivery: No complications

Family History Pertinent to infant: Maternal: Anxiety, Asthma, & Anemia

Social History (tobacco/alcohol/drugs) Pertinent to infant: No tobacco or alcohol use. Mother smoked cannabis once a day every other day throughout her pregnancy.

Father/Co-Parent of Baby Involvement: The Father is involved and is in a relationship with the mother. The parents do live together.

Living Situation of Family: Newborn will go home to a two-parent household and three other siblings.

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

Mother – High School Diploma **& Father:** High School Diploma

Birth History (10 points)

Length of Second Stage of Labor: Approximately five to ten minutes

Type of Delivery: Vaginal

Complications During Birth: None

APGAR Scores:

1 minute: 8

5 minutes: 8

Resuscitation methods beyond the normal needed: None

Intake and Output (18 points)

Intake

If breastfeeding: Plans to breastfeed baby, with future intentions to pump and bottle feed.

Feeding frequency: First time feeding newborn (plan on feeding every two hours)

Length of feeding session: Thirty minutes

One or both breasts: One (Left breast)

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: Baby has not yet voided for the first time.

Number of voids in 24 hours: N/A

Stool

Age (in hours) of first stool: Baby has not had any stool yet.

Type: N/A

Color: N/A

Number of times in 24 hours: N/A

Percentage of weight loss at time of assessment: ___N/A**_____%**

****Show your calculations; if today's weight is not available, please show how you would calculate weight loss (i.e. show the formula) **** Current weight – Birth weight (2980g) divided by % of birth weight (2980g) x 100

What is normal weight loss for an infant of this age? 5-10 % (Ricci et al., 2021).

Is this neonate's weight loss within normal limits? Current weight not available as baby was just born and only two hours old.

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	This is to monitor for infant hyper/hypoglycemia (Ricci et al., 2021).	60-99 (Ricci et al., 2021)	24	The test was complete because infant was very jittery.
Blood Type and Rh Factor	If the mom is Rh- and the baby is Rh (+), the mom would need RhoGam. In case of a blood transfusion in the infant, the blood type and RH factor must be available (Ricci et al., 2021).	A, B, AB, O, (+), (-) (Ricci et al., 2021)	N/A	N/A test not needed as mother was B (+)
Coombs Test	This detects the presence of antibodies against RBC's (Ricci et al., 2021).	(+) or (-) (Ricci et al., 2021)	N/A	N/A (test not preformed)
Bilirubin Level (All babies at 24 hours) *Utilize	Checks liver function; ensures that newborns are effectively	<5 mg/dL (Ricci et al., 2021)	N/A	Infant not old enough for test.

bilitool.org for bilirubin levels*	excreting bilirubin (Ricci et al., 2021).			
Newborn Screen (At 24 hours)	This standardized screening checks for different illnesses or conditions (Ricci et al., 2021).	Negative (Ricci et al., 2021).	**Results will not be available.**	Infant not old enough for test.
Newborn Hearing Screen	This screening checks for newborn hearing deficits (Ricci et al., 2021).	Pass or Fail (Negative) (Ricci et al., 2021).	N/A	Infant not old enough for test.
Newborn Cardiac Screen (At 24 hours)	This screening checks for congenital heart defects and abnormalities (Ricci et al., 2021)	Negative; findings do not show or suggest congenital heart abnormalities (Ricci et al., 2021).	N/A	Infant not old enough for test.

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

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

Newborn Medications (10 points)

Contain in-text citations in APA format.

Brand/Generic	**Aquamephyton (Vitamin K)**	**Illotycin (Erythromycin Ointment)**	**Hepatitis B Vaccine**		
Dose	1 mg	1 g	0.5 mL		
Frequency	Once	Once	Once		
Route	IM	Ophthalmic/Topical	IM		

Classification	Fat soluble vitamin (Drug Bank, 2023)	Macrolide & Antibiotic (Jones & Bartlett, 2023).	Recombinant antiviral vaccine (CDC, 2021).		
Mechanism of Action	"Vitamin K is a cofactor if gamma-carboxylase… this causes binding of calcium ions that convert these clotting factors to their active form, which are secreted from hepatocytes into the blood, restoring normal clotting function" (DrugBank, 2023).	"Binds with the 50S ribosomal subunit of the 70S ribosome in many types of organisms…This inhibits RNA protein synthesis in bacterial cells, causing them to die" (Jones & Bartlett, 2023)	"Induces specific humoral antibodies against the surface antigen of the hepatitis B virus" (CDC, 2021).		
Reason Client Taking	Reduce clotting time (DrugBank, 2023).	Prevent gonorrhea and chlamydia infections in the eye (Jones & Bartlett, 2023).	Taking this vaccine to prevent hepatitis B (CDC, 2021).		
Contraindications (2)	Jaundice, hemolysis, and hyperbilirubinemia are more likely to occur from increased dosages of vitamin K & hypersensitivity to its components (FDA, 2023).	-statin therapy in mother and existing injuries to the eye (Jones & Bartlett, 2023).	Allergies to yeast & hypersensitivity to its components (CDC, 2023)		
Side Effects/Adverse Reactions (2)	Tachycardia & dyspnea (FDA, 2018).	Fever & Erythema (Jones & Bartlett, 2023).	Fever & Swelling (CDC, 2021).		
Nursing Considerations (2)	Give in vastus lateralis & monitor for bleeding (FDA, 2018).	Apply closely to the infant's eye & and monitor infants for poor feedings (Jones & Bartlett, 2023).	Give in vastus lateralis & monitor for fever in infant (Ricci et al., 2021).		
Key Nursing Assessment(s)/Lab(s) Prior to	Parental consent & Assessment of infant's skin prior	Parental consent & ensuring there are no injuries in the	Parental consent & assessment of		

Administration	to injection (Ricci et al., 2021).	infant's eyes (Jones & Bartlett, 2023).	the infant's skin prior to giving injection (Ricci et al., 2021).		
Client Teaching needs (2)	Education on benefits of this vaccine & education on deficiencies and clotting factors (Ricci et al., 2021).	Educate parents on how this medication prevents infection & talk about the importance/benefits of this ointment (Jones & Bartlett, 2023).	Educate parents on the importance of this vaccine & education on side effects from this vaccine (CDC, 2021).		

Medications Reference (1) (APA):

CDC. (2021). *Hepatitis B.* Centers for Disease Control and Prevention. Retrieved October 10, 2023, from https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/hepb.pdf

FDA. (2018). *Aquamephyton.* Food and Drug Administration. Retrieved October 10, 2023, from https://www.accessdata.fda.gov/drugsatfda_docs/label/2018/012223s042lbl.pdf

Jones & Bartlett Learning. (2023). *2022 Nurse's drug handbook* (21st ed.). Jones & Bartlett Learning.

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

Vitamin K1. (2023) DrugBank. Retrieved October 10, 2023, from https://go.drugbank.com/drugs/DB01022

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	Intact, warm, smooth, flexible, and turgor as expected.	Jaundice, stork bites, milia, acrocyanosis, and Mongolian spots (Ricci et al., 2021).
Head	Normal hair distribution, symmetrical, normocephalic; circumference 34.5 cm.	Macrocephaly, Microcephaly (Ricci et al., 2021).
Fontanels	Soft and flat	Sunken or enlarged fontanels (Ricci et al., 2021).
Face	Symmetrical, no bruising	Nevus vasculosus, nevus flammeus, and facial nerve paralysis (Ricci et al., 2021).
Eyes	Symmetrical, full eyebrows/eyelashes, clear/white sclerae, brown colored.	Subconjunctival hemorrhages and chemical conjunctivitis (Ricci et al., 2021).
Nose	Symmetrical, midline, breathes through the nose.	Blockage or malformation (Ricci et al., 2021).
Mouth	Midline, symmetrical, intact hard/soft palate.	Thrush, Epstein pearls, and erupted precocious teeth (Ricci et al., 2021).
Ears	Symmetrical/fully formed, soft, flexible	Hearing loss and low-set ears (Ricci et al., 2021).
Neck	Trachea midline and full range of motion.	Clavicular fractures and restricted movement (Ricci et al., 2021).
Chest	Symmetric, sternum midline, circumference: 31 cm, and no excess bulging.	Whitish discharge and nipple engorgement (Ricci et al., 2021).
Breath Sounds	Full/deep respirations, lung sounds clear throughout, no use of accessory muscles, equal rise and fall of chest.	Rubs, wheezes, crackles, and stridor (Ricci et al., 2021).
Heart Sounds	Auscultated S1 and S2 sounds.	S3 not present in most neonates; S4 signifies pathologic diastolic failure (Ricci et al., 2021).
Abdomen	No distension, soft, rounded, three vessels in the umbilical cord.	Two vessels in the umbilical cord and distended (Ricci et al., 2021).
Bowel Sounds	Normoactive	Hyperactive or hypoactive (Ricci et al., 2021).
Umbilical Cord	Two arteries and one vein	Only two vessels in the umbilical cord (Ricci et al., 2021).
Genitals	Clean, swollen, no lesions/wounds, and female genital present.	Vaginal discharge in females and edematous scrotum in males (Ricci et al., 2021).

Anus	Midline, no drainage	Not midline and fistula to the vagina (Ricci et al., 2021).
Extremities	10 toes, 10 fingers, full range of motion, and no clicking in hips.	Congenital hip dislocation (Ricci et al., 2021).
Spine	Midline, curved, no gaps/dimples in spinal column, and no tufts.	Tuft or dimpled spine (Ricci et al., 2021).
Safety • **Matching ID bands with parents** • **Hugs tag** • **Sleep position**	ID band matches to parents, swaddled, sleeps in supine position, and hugs tag in place.	No expected variations in findings.

Vital Signs, 3 sets (6 points)

Time	**Temperature**	**Pulse**	**Respirations**
Birth	36.6 ºC Axillary	150 bpm	55 resp/min
4 Hours After Birth	36.8 ºC Axillary	131 bpm	40 resp/min
At the Time of Your Assessment	36.6 ºC Axillary	142 bpm	44 resp/min

Vital Sign Trends:

Pain Assessment, 1 set (2 points)

Time	**Scale**	**Location**	**Severity**	**Characteristics**	**Interventions**
0830	NIPS	N/A	0	N/A	Continue monitoring

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

Nursing Interventions and	**Frequency**	**Why was this intervention/ treatment**

Medical Treatments (Identify nursing interventions with "N" after you list them, identify medical treatments with "M" after you list them.)		**provided to this patient? Please give a short rationale.**
(N) Changing diaper	As needed	Changing the diaper when the baby defecates and urinates is comforting and allows the infant to build trust with its caregivers.
(N) Feeding	Every two hours	The mother should feed the baby every two hours; this prevents hypoglycemia which is important as the baby had low blood sugar.
(N) Swaddling	As needed	The newborn was placed in a bassinet without a blanket or clothes, this could cause hypothermia.
(N) Holding	As needed	The newborn was lying in the bassinet and was crying loudly. Holding and rocking the baby is a comfort measure for the baby to stop crying.

Discharge Planning (3 points)

Discharge location: Home

Follow up plan (include plan for newborn ONLY): Monitor glucose levels, monitor weight, monitor for adverse reactions from newborn injections, and see in doctor's office twenty-four to forty-eight hours after discharge.

Education needs: Breastfeeding techniques, cessation of smoking, and swaddling techniques.

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)** • How did the patient/family respond to the nurse's actions? • Client response, status of goals and outcomes, modifications to plan.
1. Risk for malnutrition related to poor nutrition as evidenced by low blood sugar.	This was chosen because the infant had a low blood sugar of 24.	**1.** Provide a small amount of formula to boost the baby's glucose level (Phelps, 2020). **Rationale:** Giving the baby formula can boost their glucose levels as the mom is not able to produce enough milk yet (Phelps, 2020). **2.** Encourage small, frequent feedings (Phelps, 2020). **Rationale:** This will ensure proper nutrition and maintain the infant's glucose levels (Phelps, 2020).	The mom was okay with supplementing with formula to keep her baby's glucose level up and will provide more small and frequent feedings.
2. Risk for hypothermia related to insufficient caregiver knowledge as evidenced by the infant laying in a bassinet without blankets or clothes.	This was chosen because the mom had the baby lying in the bassinet beside her without any clothes or blankets on the newborn.	**1.** Encourage skin-to-skin contact between the parent and child (Phelps, 2020). **Rationale:** Having skin-to-skin contact can help warm the baby providing better thermoregulation (Phelps, 2020). **3.** Provide education on swaddling techniques (Phelps, 2020). **Rationale:** Swaddling the baby will keep it warm, comforted, and keep the	The mother understood the importance of keeping the baby warm and was positive for the interventions being placed to maintain the newborn's thermoregulation effectively. The nurse/student nurse retaught the mom how to swaddle her baby.

		infant at a comfortable temperature (Phelps, 2020).	
3. Knowledge deficit of breastfeeding related to low blood sugar as evidenced by blood sugar of 24.	This was chosen because the baby had low blood sugar. The baby was also not latching properly.	**1.** Educate the mother on latch techniques and proper positioning (Phelps, 2020). **Rationale:** Ensuring the baby is in the correct position and latching properly will ensure the baby is getting proper feedings (Phelps, 2020). **2.** Promote relaxation and comfort for mother during breastfeeding (Phelps, 2020). **Rationale:** Discomfort can lead to mom's milk not being let down properly (Phelps, 2020).	The mom was educated on being calm and relaxed while feeding the baby as it can improve the feeding for the infant. Once educated on latch and positioning techniques of breastfeeding, the mom planned to try what she was taught for the next feeding.
4. Knowledge deficit of bathing related to two-year age difference of previous child to current infant as evidenced by mom asking, "how often can I bathe my baby"?	This was chosen because the mom was concerned about how often her baby could get a bath once she left the hospital.	**1.** Educate the mother to bathe the infant two to three times weekly (Phelps, 2020). **Rationale:** Bathing an infant frequently can cause the infant's skin to dry out (Phelps, 2020). **2.** Education on not getting the umbilical cord wet nor bathing in a tub until the umbilical cord falls off (Phelps, 2020). **Rationale:** Getting the umbilical cord wet can increase the risk of infection (Phelps, 2020).	The mother was very receptive to what was being taught to her and understood the importance of not getting the infant's umbilical cord wet and not bathing her baby every day.

Other References (APA):

Phelps, L. L. (2020). *Sparks and Taylor's nursing diagnosis reference manual* (11th ed.). Wolters Kluwer.

References

CDC. (2021). *Hepatitis B.* Centers for Disease Control and Prevention. Retrieved October 10, 2023, from https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/hepb.pdf

FDA. (2018). *Aquamephyton.* Food and Drug Administration. Retrieved October 10, 2020, from https://www.accessdata.fda.gov/drugsatfda_docs/label/2018/012223s042lbl.pdf

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