

**N432 Newborn Care Plan**

Whisper Brown

Lakeview College of Nursing

N432: Maternal-Newborn Care

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**Demographics (10 points)**

<p><b>Date &amp; Time of Clinical Assessment</b></p> <p>4/4/2024 at 0822</p>	<p><b>Patient Initials</b></p> <p>J.H.</p>	<p><b>Date &amp; Time of Birth</b></p> <p>4/2/2024 at 2029</p>	<p><b>Age (in hours at the time of assessment)</b></p> <p>38 hours old</p>
<p><b>Gender</b></p> <p>Male</p>	<p><b>Weight at Birth</b></p> <p>(gm) _____ 4390 _____</p> <p>(lb.) ___9__ (oz.)</p> <p>_____10.9_____</p>	<p><b>Weight at Time of Assessment</b></p> <p>(gm) _____ 4153 _____</p> <p>(lb.) ___9__ (oz.)</p> <p>_____2.5_____</p>	<p><b>Age (in hours) at the Time of Last Weight</b></p> <p>38 hours old (my weight)</p> <p>23 hours old (previous weight taken by RN)</p>
<p><b>Race/Ethnicity</b></p> <p>White</p>	<p><b>Length at Birth</b></p> <p>Cm _____ 57.15 _____</p> <p>Inches _____ 22.5 _____</p>	<p><b>Head Circumference at Birth</b></p> <p>Cm _____ 34.5 _____</p> <p>Inches</p> <p>_____ 13.583 _____</p>	<p><b>Chest Circumference at Birth</b></p> <p>Cm</p> <p>_____ 37.5 _____</p> <p>Inches</p> <p>_____ 14.76 _____</p>

**\*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:** G1P1001

**When prenatal care started:** October 2023

**Abnormal prenatal labs/diagnostics:** Leukocyte esterase, white blood cells, glucose, membrane rupture, red blood cells, HGB, HCT, cannabinoids (urine), LD, calcium, total protein, albumin, sodium, CO<sub>2</sub>, uric acid

**Prenatal complications:** Gestational hypertension, anxiety, depression, macrosomia, THC use

**Smoking/alcohol/drug use in pregnancy:** Cannabis use on a rare occasion

### **Labor History of Mother:**

**Gestation at onset of labor:** 39 weeks 1 day

**Length of labor:** 9 hours and 49 minutes

**ROM:** Yes, 4/2/2024 at 10:43 AM

**Medications in labor:** Oxytocin, morphine, azithromycin, cefazolin, famotidine, ketorolac, lactated ringers, metoclopramide

**Complications in labor and delivery:** Failure to progress in second stage, cephalopelvic disproportion, vertex presentation of baby

**Family History Pertinent to infant:** Gallbladder disease (maternal grandmother)

**Social History (tobacco/alcohol/drugs) Pertinent to infant:** Cannabis use while pregnant

**Father/Co-Parent of Baby Involvement:** No involvement

**Living Situation of Family:** Lives alone

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

High school diploma

**Birth History (10 points)**

**Length of Second Stage of Labor:** 7 hours and 21 minutes

**Type of Delivery:** Cesarean section, low transverse

**Complications During Birth:** Failure to progress in second stage, cephalopelvic deep proportion, vertex presentation of baby

**APGAR Scores:**

**1 minute:** 9

**5 minutes:** 9

**Resuscitation methods beyond the normal needed:** None

**Intake and Output (18 points)**

**Intake**

**If breastfeeding:** 6 cc of pumped breast milk

**Feeding frequency:** Every 2-3 hours

**Length of feeding session:** 10 minutes on right breast, 8 minutes on left breast

**One or both breasts:** Both

**If bottle feeding:** 13 cc

**Formula type or Expressed breast milk (EBM):** Express breast milk (3 cc), formula (10 cc)

**Frequency:** As needed due to struggle with breastfeeding due to baby having high palate and mother having left nipple retraction

**Volume of formula/EBM per session:** 10-13 cc

**Output**

**Void**

**Age (in hours) of first void:** 12 hours old

**Number of voids in 24 hours:** 1

**Stool**

**Age (in hours) of first stool:** 3 hours old

**Type:** Loose

**Color:** Black

**Number of times in 24 hours:** 4

**Percentage of weight loss at time of assessment:** \_\_\_\_\_5.40\_\_\_\_\_ %

**Formula:** Weight loss divided by birthweight multiplied by 100. (9 lb. 10.9 oz minus 9 lb. 2.5 oz to get 8.4 oz then divide 8.4 oz by 9 lb. 10.9 oz to get 0.0542285345 then multiply the 0.0542285345 by 100 to get 5.40%)

**\*\*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?** Normal is 2-5%

**Is this neonate's weight loss within normal limits?** Yes, normal is 2-5%

**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.**

<b>Name of Test</b>	<b>Why is this test ordered for any infant?</b>	<b>Expected Results</b>	<b>Client's Results</b>	<b>Interpretation of Results</b>
<b>Blood Glucose Levels</b>	<p>“For newborns who fall into any of the following categories and are more likely to experience pathological hypoglycemia: large for gestational age, tiny for gestational age, or born to mothers with gestational diabetes or diabetes</p>	60-99 mg/dL	61	<p>Based on the client's results, the blood glucose level for this patient falls within the expected results. The patient results could be higher but we would not want the patient's blood glucose to go any lower.</p>

	<p>mellitus, glucose screening is advised”</p> <p>(Stanford Medicine, 2024)</p>			
<p><b>Blood Type and Rh Factor</b></p>	<p>“If the mother is Rh negative and the unborn child is Rh positive, complications may arise during pregnancy. During pregnancy, the blood usually does not mix with that of the unborn child, however, after the baby is born, there's a chance that a tiny bit of</p>	<p>“A child may inherit the Rh factor and blood type from one or both parents, or from both”</p> <p>(Stanford Medicine, 2024)</p>	<p>Not assessed due to blood type of mother</p>	<p>I cannot interpret the results due to the test not being done on my patient due to the fact that the mother was not blood type O or did not have a negative Rh factor.</p>

	<p>the mother's blood will come into contact with theirs. The body may develop proteins known as Rh antibodies if the mother's blood and the baby's blood combine if the mother is Rh negative and the baby is Rh positive.</p> <p>Throughout the first trimester, the antibodies don't cause any issues. However, if the mother gets pregnant</p>			
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	<p>again, issues could arise” (Mayo Clinic, 2022)</p>			
<b>Coombs Test</b>	<p>“This test is carried out on a blood sample from the baby, typically when the infant exhibits jaundice. In order to rule out hemolysis, the test looks for "foreign" antibodies that have already attached themselves to the baby's red blood cells” (Stanford</p>	<p>“If the test is positive, the infant is most likely to experience moderate to severe jaundice after birth because the mother's antibodies are connected to their red blood cells. So the expected finding of this test would be negative meaning the</p>	<p>Not assessed due to blood type of mother</p>	<p>I cannot interpret the results due to a blood test not being ran on the baby due to the mother not having blood type O or not having a negative Rh factor.</p>

	Medicine, 2024)	mother's antibodies are not connected to the infant's red blood cells (verywell family, 2022)		
<b>Bilirubin Level (All babies at 24 hours)</b> <b>*Utilize bilitool.org for bilirubin levels*</b>	<p>“This test is ordered by doctors to determine the level of bilirubin in the blood. Elevated bilirubin levels may indicate hepatic dysfunction or excessive erythropoiesis. This test may be administered to newborns,</p>	<p>The expected finding for my patient is for the bilirubin level to not go above 12.8 mg/dL.</p>	7.7 mg/dL	<p>Based on the patient's bilirubin level, the patient fall in the normal range for bilirubin levels.</p>

	<p>particularly those delivered prematurely” (Nemours Children’s Health, 2022)</p>			
<p><b>Newborn Screen (At 24 hours)</b></p>	<p>“Conditions that may have an impact on a child’s long-term health or survival are identified through newborn screening. Children can achieve their full potential and avoid death or handicap via early discovery, diagnosis, and intervention”</p>	<p>“A within normal limits or negative result indicates the test screen came out normally, obviating the need for further investigation. Final diagnoses are not provided via newborn screening. It merely signals the need for</p>	<p><b>Results will not be available.</b></p>	<p>I cannot interpret the results due to the results not being available for viewing.</p>

	(Center of Disease Control and Prevention, 2021)	additional testing. If a child exhibits symptoms of a condition, they should be checked very away, even if the screening results were normal” (MN Department of Health, 2024)		
<b>Newborn Hearing Screen</b>	“A newborn undergoes a hearing test because, in the absence of screening or testing, hearing loss might not be identified until the child is older	“A pass result indicates that, at the time of the screen, the newborn’s hearing in both ears was normal. For both ears to be deemed a	Passed	Based on the patient’s results of the hearing test, the patient passed the hearing test which means the newborn’s hearing is normal in both ears

	<p>than a year. The brain’s hearing centers won’t be appropriately stimulated if hearing loss is not discovered until later in life. Speech and language development may be delayed, and hearing development may be impacted. Academic performance as well as social and emotional growth may be impacted” (Stanford</p>	<p>passing result overall, they need to pass a single screening. It is not a passing result to combine passing outcomes in opposite ears on consecutive screens” (MN Department of Health, 2022)</p>		
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	Medicine, 2024)			
<b>Newborn Cardiac Screen (At 24 hours)</b>	<p>“Before symptoms or signs appear and before the infants are released from the birth hospital, newborns with significant congenital heart abnormalities (critical CHDs) can be identified” (Center of Disease Control and Prevention, 2023)</p>	Passed	Passed	Based on the patient's results of the cardiac screening, the patient passed the cardiac test which means there are no cardiac abnormalities that are present within the patient.

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

CDC Staff. (2023, February 3). *Critical congenital heart defects screening methods*. CDC.

<https://www.cdc.gov/ncbddd/heartdefects/hcp.html#:~:text=Newborn%20screening%20for%20critical%20congenital,discharged%20from%20the%20birth%20hospital.>

CDC Staff. (2021, November 29). *Newborn screening portal*. CDC.

<https://www.cdc.gov/newbornscreening/index.html#:~:text=Newborn%20screening%20identifies%20conditions%20that,to%20reach%20their%20full%20potential.>

Hirsch, L. (2022, November). *Blood test: bilirubin*. Nemours Kids Health.

<https://kidshealth.org/en/parents/test-bilirubin.html#:~:text=Doctors%20order%20this%20test%20to,early%2C%20might%20get%20this%20test.>

Mayo Clinic Staff. (2022, July 29) *Rh factor blood test*. Mayo Clinic.

<https://www.mayoclinic.org/tests-procedures/rh-factor/about/pac-20394960#:~:text=Why%20it's%20done,when%20the%20baby%20is%20born.>

MN Department of Health Staff. (2024, January 18). *Results of newborn screening explained*.

MN Department of Health.

<https://www.health.state.mn.us/people/newbornscreening/families/screeningresults.html>

MN Department of Health Staff. (2022, October 4). *Newborn screening information for providers: hearing screening results*. MN Department of Health.

<https://www.health.state.mn.us/people/newbornscreening/providers/hearingresults.html#:~:text=A%20%22PASS%22%20result%20means%20that,not%20constitute%20a%20passing%20result.>

Siroto, J. (2022, May 4). *What does it mean to be coombs positive?* Verywell Family.

<https://www.verywellfamily.com/coombs-positive-symptoms-causes-treatment-5206804#:~:text=%22A%20Coombs%20test%20is%20routinely,to%20severe%20jaundice%20after%20birth.%22>

Stanford Medicine Staff. (2024). *Hearing screening tests for newborns*. Stanford Medicine Children's Health. <https://www.stanfordchildrens.org/en/topic/default?id=hearing-screening-tests-for-newborns-90-P02699>

Stanford Medicine Staff. (2024). *Hypoglycemia*. Stanford Medicine Newborn Nursery.

[https://med.stanford.edu/newborns/clinical-guidelines/hypoglycemia.html#:~:text=Glucose%20screening%20is%20recommended%20for,Small%20for%20gestational%20age%20\(SGA\)](https://med.stanford.edu/newborns/clinical-guidelines/hypoglycemia.html#:~:text=Glucose%20screening%20is%20recommended%20for,Small%20for%20gestational%20age%20(SGA))

Stanford Medicine Staff. (2024). *RH disease*. Stanford Medicine Children's Health.

<https://www.stanfordchildrens.org/en/topic/default?id=rh-disease-90->

[P02498#:~:text=The%20Rh%20factor%20is%20a,a%20combination%20of%20both%20parents.](#)

Stanford Medicine Staff. (2024). *The coombs' test*. Stanford Medicine Newborn Nursery.

<https://med.stanford.edu/newborns/professional-education/jaundice-and-phototherapy/the-coombs--test.html#:~:text=This%20is%20the%20test%20that,a%20potential%20cause%20of%20hemolysis.>

### **Newborn Medications (10 points)**

**Contain in-text citations in APA format.**

<b>Brand/Generic</b>	<b>Aquamephyton (Vitamin K)</b>	<b>Illotycin (Erythromycin Ointment)</b>	<b>Hepatitis B Vaccine</b>
<b>Dose</b>	1 mg	5 mg/gram	0.5 mL
<b>Frequency</b>	Once	Once	Once
<b>Route</b>	Intramuscular	Topical on eyes	Intramuscular
<b>Classification</b>	Pharmacologic class: “Anticoagulant reversal agent” (Drugs.com, 2023)  Therapeutic class: “Vitamins” (Drugs.com, 2023)	Pharmacologic class: “Macrolide antibiotics” (Drugs.com, 2023)  Therapeutic class: “Antibiotics” (Drugs.com, 2023)	Pharmacologic class: “Nucleoside reverse transcriptase inhibitors” (Drugs.com, 2024)  Therapeutic class: “Vaccine” (Drugs.com, 2024)
<b>Mechanism of Action</b>	“Aquamephyton is a man-made form of vitamin K, which	“Erythromycin belongs to the family of medicines called	“Hepatitis B is a serious disease caused by a virus. Hepatitis B

	<p>occurs naturally in the body. It treats and prevents low levels of blood clotting factors needed to help your blood to thicken and stop bleeding normally” (Drugs.com, 2023)</p>	<p>antibiotics. Erythromycin ophthalmic preparations are used to treat infections of the eye. They also may be used to prevent certain eye infections in newborn babies, such as neonatal conjunctivitis and ophthalmia neonatorum. They may be used with other medicines for some eye infections (Drugs.com, 2023)</p>	<p>causes inflammation of the liver, vomiting, and jaundice (yellowing of the skin or eyes). Hepatitis can lead to liver cancer, cirrhosis, or death. The hepatitis B pediatric vaccine is used to help prevent this disease in children and teenagers. The vaccine helps your child's body develop immunity to hepatitis B but will not treat an active infection the child already has” (Drugs.com, 2024)</p>
<p><b>Reason Client Taking</b></p>	<p>“Patient is taking aquamephyton to prevent increased bleeding and help with blood clotting”</p>	<p>“Patient is taking to prevent certain eye infections of newborn babies, such as neonatal conjunctivitis</p>	<p>“Patient is taking to help develop immunity to the hepatitis B disease” (Drugs.com, 2024)</p>

	(Drugs.com, 2023)	and ophthalmia neonatorum” (Drugs.com, 2023)	
<b>Contraindications (2)</b>	<p>“Do not give aquamephyton if consent is not signed” (Drugs.com, 2023)</p> <p>“Wait to give aquamephyton if the infant is having trouble breathing due to aquamephyton possible causing gasping syndrome” (Drugs.com, 2023)</p>	<p>“Hypersensitivity” (Drugs.com, 2023)</p> <p>“Do not give this medication if the consent is not signed by the parents” (Drugs.com, 2023)</p>	<p>“Sensitivity to yeast” (Drugs.com, 2024)</p> <p>“Hypersensitivity to the hepatitis B vaccine” (Drugs.com, 2024)</p>
<b>Side Effects/Adverse Reactions (2)</b>	<p>“Gasping syndrome in infants due to the benzyl alcohol in the medication” (Drugs.com, 2023)</p>	<p>“Itching” (Drugs.com, 2023)</p> <p>“Swelling of the face, tongue or throat”</p>	<p>“Fussiness, irritability, crying for an hour or longer” (Drugs.com, 2024)</p>

	<p>“Bluish color of the fingernails, lips, skin, palms, or nail beds in infants” (Drugs.com, 2023)</p>	<p>(Drugs.com, 2023)</p>	<p>“Breathing that stops during sleep” (Drugs.com, 2024)</p>
<p><b>Nursing Considerations (2)</b></p>	<p>“Get consent by the parents before administering aquamephyton” (Drugs.com, 2023)</p> <p>“Check the medicine before using. It should be clear and yellow. Do not use it if it is discolored or has particles in it” (Drugs.com, 2023)</p>	<p>“Make sure the consent is informed” (Drugs.com, 2023)</p> <p>“After administration, keep an eye out for any negative effects” (Drugs.com, 2023)</p>	<p>“Check the medicine before using. It should be clear and yellow. Do not use it if it is discolored or has particles in it” (Drugs.com, 2024)</p> <p>“Ask the mother if they are allergic to yeast due to the possibility of the yeast allergy transferring to the infant” (Drugs.com, 2024)</p>
<p><b>Key Nursing Assessment(s)/Lab</b></p>	<p>“Inspect injection site before</p>	<p>“Examine eyes for crusting or discharge”</p>	<p>“Before administering the vaccine, verify that</p>

<p><b>(s) Prior to Administration</b></p>	<p>administration to look for any abnormalities” (Drugs.com, 2023)</p> <p>“Clean site before administration” (Drugs.com, 2023)</p>	<p>(Drugs.com, 2023)</p> <p>“Before administering, wash the eyes” (Drugs.com, 2023)</p>	<p>the consent is signed” (Drugs.com, 2024)</p> <p>“Wash site before administering the vaccine” (Drugs.com, 2024)</p>
<p><b>Client Teaching needs (2)</b></p>	<p>“Since they cannot synthesize the vitamin K required for some coagulation factors, newborns are susceptible to bleeding” (Drugs.com, 2023)</p> <p>“Comfort the infant both during and after administration” (Drugs.com, 2023)</p>	<p>“Avoid wiping away ointment” (Drugs.com, 2023)</p> <p>“Educate of the possible side effects of this medication” (Drugs.com, 2023)</p>	<p>“Teach the parent the positive effects of the hepatitis B vaccine” (Drugs.com, 2024)</p> <p>“Educate the parents on the possible side effects of this medication” (Drugs.com, 2024)</p>

**Medications Reference (1) (APA):**

Drugs.com Staff, (2023, June 6). *Aquamephyton advanced patient information*. Drugs.com.

<https://www.drugs.com/cons/aquamephyton.html>

Drugs.com Staff. (2023, September 22). *Ilotycin advanced patient information*. Drugs.com.

<https://www.drugs.com/cons/ilotycin.html>

Drugs.com Staff. (2024, January 1). *Hepatitis B pediatric vaccine uses, side effects & warnings*.

Drugs.com. <https://www.drugs.com/mtm/hepatitis-b-pediatric-vaccine.html>

**Newborn Assessment (20 points)**

Area	Your Assessment	Expected Variations and Findings
<b>Skin</b>	Warm, dry; intact except for scab/wound (possibly aplasia cutis congenita) on the posterior side of the head, pressure points without redness	<p><b>Expected Variations and Findings</b></p> <p><i>*This can be found in your book on page 622 in Ricci, Kyle, &amp; Carman 4<sup>th</sup> ed 2021.</i></p> <p>“Normal: smooth, flexible, good skin turgor, well hydrated, warm” (Ricci et al., 2021).</p>
<b>Head</b>	Symmetrical, fontanel soft and flat; suture lines palpable; base symmetrical at rest and movement size per gestational age, 1cm scabbed wound on back of the head	“Normal: varies with age, gender, and ethnicity” (Ricci et al., 2021).
<b>Fontanel</b>	Soft and flat	“Normal: fontanel are not enlarged” (Ricci et al., 2021).
<b>Face</b>	Symmetrical at rest and movement	“Normal: full cheeks, facial features symmetric” (Ricci et al., 2021).

<b>Eyes</b>	Left eye appears with small, crusty, thick, yellow drainage; right eye clear	“Normal: clear and symmetrically placed on face; online with ears”  (Ricci et al., 2021).
<b>Nose</b>	Nostrils patent, appearance normal; breathes through both nostrils; no drainage; no positional deformities	“Normal: small, placement in the midline and narrow, ability to smell”  (Ricci et al., 2021).
<b>Mouth</b>	Lips, tongue, gums, palate, oral mucosa all pink and moist, intact, with no swelling or lesions. Palate is high with narrow gap	“Normal: aligned in midline, symmetric, intact soft and hard palate” (Ricci et al., 2021).
<b>Ears</b>	Appearance normal; cartilage present; ear canals visible; no drainage; pinna flexible; pinna horizontal with eye inner canthus; symmetrical	“Normal: soft and pliable with quick recoil when folded and released”  (Ricci et al., 2021).
<b>Neck</b>	Symmetrical, smooth, trachea midline	“Normal: short, creased, moves freely, baby holds head in midline”  (Ricci et al., 2021).
<b>Chest</b>	Anterior, posterior, lateral diameters equal; rib margins	“Normal: round, symmetric, smaller

	apparent; round, symmetrical shape; symmetrical expansion; xiphoid process apparent; circumference at birth was 37.5 centimeters	than head” (Ricci et al., 2021).
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<b>Breath Sounds</b>	Clear and equal bilaterally in all fields	“Normal: breath sounds equal bilaterally with little difference between inspiration and expiration” (Ricci et al., 2021).
<b>Heart Sounds</b>	Regular rhythm, S1, S2; PMI mid left sternal border	“Normal: S1 and S2 heard, the point of maximal impulse is a lateral to midclavicular line located at the 4th and coastal space” (Ricci et al., 2021).
<b>Abdomen</b>	Abdomen round, soft, symmetrical; bowel sounds audible and normoactive, one bowel movement in 48 hours, first bowel movement at 3 hours post birth	“Normal: protuberant contour, soft, 3 vessels in umbilical cord” (Ricci et al., 2021).
<b>Bowel Sounds</b>	Bowel sounds audible and normoactive in all four quadrants	“Normal: bowel sounds can be heard in all four quadrants” (Ricci et al., 2021).
<b>Umbilical Cord</b>	Cord and periumbilical site intact and drying	“Normal: 3 vessels in umbilical cord” (Ricci et al., 2021).
<b>Genitals</b>	Penis straight; foreskin present, not retracted, testes and scrotum	“Normal: smooth glans, meatus centered at tip of penis” (Ricci et al.,

	per gestational age	2021).
<b>Anus</b>	Anal opening midline position; anal opening patent; anal wink present	“Normal: anus is in correct position and patent” (Ricci et al., 2021).
<b>Extremities</b>	10 toes; joints with full range of motion; palms per gestational age; soles per gestational age; no hip click; no webbing, 10 fingers	“Normal: extremities symmetric with free movement” (Ricci et al., 2021).
<b>Spine</b>	Spinal column aligned; spinal column intact	“Normal: no tuft or dimple on spine” (Ricci et al., 2021).
<b>Safety</b>  <ul style="list-style-type: none"> <li>• <b>Matching ID bands with parents</b></li> <li>• <b>Hugs tag</b></li> <li>• <b>Sleep position</b></li> </ul>	Matching ID bracelets with parent present, hugs tag in place and activated, infant sleeping on back	Matching ID bracelets with parent present, hugs tag in place and activated, infant sleeping on back

**Vital Signs, 3 sets (6 points)**

<b>Time</b>	<b>Temperature</b>	<b>Pulse</b>	<b>Respirations</b>
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<b>Birth</b>	98.2 °F	146 bpm	60 rpm
<b>4 Hours After Birth</b>	98.3 °F	110 bpm	48 rpm
<b>At the Time of Your Assessment</b>	98.5 °F	120 bpm	42 rpm

**Vital Sign Trends:** Throughout the patient’s time of labor and being of post-partum, the vitals stayed around the same trend. The pulse fluctuated while the patient was in the hospital.

**Pain Assessment, 1 set (2 points)**

<b>Time</b>	<b>Scale</b>	<b>Location</b>	<b>Severity</b>	<b>Characteristics</b>	<b>Interventions</b>
0822	FLACC	N/A  (no pain noted)	N/A  (no pain noted)	N/A  (no pain noted)	N/A  (no pain noted)

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

<b>Nursing Interventions and Medical Treatments (Identify nursing interventions with “N” after you list them, identify medical treatments with “M” after you list them.)</b>	<b>Frequency</b>	<b>Why was this intervention/ treatment provided to this patient? Please give a short rationale.</b>
Cardiac screening (M)	Once	“Before an infant leaves the hospital,

		<p>screening for critical congenital heart defects, or critical CHDs, can assist in identifying certain babies who have a critical CHD. This enables early treatment for these infants and may avert early-life impairment or death”</p> <p>(Center of Disease Control and Prevention, 2022)</p>
Hearing screening (M)	Once	<p>“Children's hearing loss can sometimes go undiagnosed for months or even years because it is not immediately apparent. A newborn hearing screening can help identify whether the child needs more testing or if they may already have a hearing problem (Center of Disease Control and Prevention, 2023)</p>
Bathing the patient (N)	As needed	<p>“The first bath's objectives are to cleanse the newborn's body of unwanted fluids, such as blood and meconium, and to hydrate the skin to preserve skin integrity, barrier function, and body temperature” (BMC Research Notes,</p>

		2020)
Apply antibiotic to back of head  (N)	As ordered	The antibiotic was applied to the infant's head due to the possible aplasia cutis congenita that was present since birth.

**Discharge Planning (3 points)**

**Discharge location:** Home

**Follow up plan (include plan for newborn ONLY):** Both the mother and the infant require postnatal care. In addition to postnatal care, which involves two comprehensive examinations on the first day, three more visits are recommended. These check-ups should occur six weeks following delivery, on day three (48–72 hours), and in the interval between days 7–14. These exchanges may occur in a hospital or at home, depending on the circumstances and the healthcare provider (Better Health Channel, 2024).

**Education needs:** Among the many things that new moms need to learn are how to bathe, change, feed, and look after their umbilical cords. Additional needs include encouraging the mother to start nursing her infant if she so chooses, supporting her in her choices, and giving her confidence that she can support her child. In addition, I would advise the mother to be alert for any pain, redness, itching, or leakage that could be signs of an infection related to the cesarean section. I would also educate her on taking care of the wound/scab on the back of the baby's head.

### 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)	Rational (1 pt each)	Intervention/Rational (2 per dx) (1 pt each)	Evaluation (2 pts each)
Identify problems that are specific to this patient. Include full nursing diagnosis with “related to” and “as evidenced by” components	Explain why the nursing diagnosis was chosen	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.	<ul style="list-style-type: none"> <li>• How did the patient/family respond to the nurse’s actions?</li> <li>• Client response, status of goals and outcomes, modifications to plan.</li> </ul>
1. Risk of loss of blood related to low transverse abdominal incision, as evidenced by the	Possibility of the incision site rupturing.	<p><b>1.</b> Examine and assess lacerations and bandages (Phelps, 2022).</p> <p><b>Rationale:</b> It is possible to determine whether there is</p>	The patient took well to the information provided regarding the warning signs and symptoms of bleeding and that the goal was to

<p>4/2/24 cesarean delivery.</p>		<p>considerable bleeding, redness, or an unpleasant smell by evaluating and examining the wounds and bandages (Phelps, 2022).</p> <p><b>2.</b>Keep an eye out for physiological reactions, such as vital signs, oxygen saturation, and LOC, that fall within typical or predicted levels (Phelps, 2022).</p> <p><b>Rationale:</b> By recognizing these subtle changes in respiration, pulse, and blood pressure brought on by early bleeding coping mechanisms (Phelps, 2022).</p>	<p>stop the bleeding. A modification to the plan could be to inform someone else who is taking care of this patient at home to also look for signs of bleeding.</p>
<p><b>2.</b> Risk of ineffective breastfeeding related to</p>	<p>Possibility of poor weight gain in the infant</p>	<p><b>1.</b> Inform parents and other caregivers about nursing and lactation (Phelps, 2022)</p> <p><b>Rationale:</b> Fosters</p>	<p>The baby will successfully breastfeed, and the mother will express her concerns</p>

<p>infant's high palate as evidenced by poor latch and use of nipple shield.</p>		<p>comprehension and establishes reasonable expectations (Phelps, 2022)</p> <p><b>2. Educate</b> parents/caregivers on the correct infant positioning during breastfeeding (Phelps, 2022)</p> <p><b>Rationale:</b> Encourages effective breastfeeding (Phepls, 2022)</p>	<p>and ask for help when needed. The mother will also express how comfortable she is with nursing techniques.</p>
<p><b>3.</b> Risk of ineffective infant feeding pattern related to defects of the soft palate as evidenced by maternal reports of poor latch and feeding</p>	<p>Risk for inability to stick to a feeding schedule and mother stress</p>	<p><b>1.</b> Inform parents and other caregivers about different feeding positions (Phelps, 2022)</p> <p><b>Rationale:</b> Educates about several positions that can help reduce the strain on the infant and parents (Phelps, 2022)</p> <p><b>2.</b> Teach the</p>	<p>Within reasonable bounds, the mother and child will create a feeding schedule, the baby will put on weight, and the mother will show how to handle an unsatisfactory feeding schedule.</p>

<p>schedule</p>		<p>caregivers/parents how to maintain a feeding log (Phelps, 2022)</p> <p><b>Rationale:</b> Gives details regarding the feeding habits throughout time (Phelps, 2022)</p>	
<p>4. Risk for infection related to skin integrity as evidenced by 1 cm scab of infant's head</p>	<p>Possibility of infection and impaired wound healing</p>	<p>1. Teach the caregivers about infection control practices (Phelps, 2022)</p> <p><b>Rationale:</b> Gives the caregivers details regarding how to prevent an infection of a wound (Phelps, 2022)</p> <p>2. Make sure that infection control and hand hygiene are strictly followed (Phelps, 2022)</p> <p><b>Rationale:</b> By following hand hygiene, the risk for infection goes down</p>	<p>The patient will not contract an illness, the parents or caregiver will explain two infection prevention or risk reduction strategies, and they will show how to provide a safe environment for the newborn.</p>

		(Phelps, 2022)	
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