

N432 Adult Health II
Proctored ATI Remediation Template

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Assessment Name: RN Maternal Newborn 2023
Semester: Spring

Main Category: Management of Care

Subcategory: Infertility

Topic: Teaching about In Vitro Fertilization

- During an initial fertility counseling session, the nurse should conduct a thorough history of both partners to identify potential causes of subfertility and provide education.
- Assessment of the pelvis, hormone analysis, postcoital test, ultrasonography, hysteroscopy, laparoscopy, semen analysis, and ultrasonography.
- Genetic counseling may be recommended by the provider if there is a family history of birth defects

Main Category: Safety and Infection Control

Subcategory: Medical conditions

Topic: Priority action for implementing seizure precautions for a client who has Preeclampsia

- Hypertensive disease in pregnancy is divided into clinical subsets of the disease based on end-organ effects and progresses along a continuum from gestational hypertension
- Maintain a dark, quiet environment to avoid stimuli that can precipitate a seizure.
- Maintain a patent airway in the event of a seizure.

Main Category: Basic Care and Comfort

Subcategory: Postpartum physiological adaptations

Topic: Planning care for a client who has a third-degree Perineal laceration

- Wash both hands thoroughly before and after voiding.
- Assess bladder elimination pattern. Excessive urine diuresis (more than 3,000 mL/day) is normal within the first 2 to 3 days after birth.
- Enemas and suppositories are contraindicated for clients who have third- or fourth-degree perineal laceration.

Main Category: Reduction of Risk Potential

Subcategory: Fetal assessment during labor

Topic: Actions to take for late decelerations in fetal heart rate

- Leopold maneuvers consist of performing external palpations of the maternal uterus through the abdominal wall to determine fetal lie and attitude.
- Ask the client to empty the bladder before beginning the assessment
- For low-risk labor and delivery, this procedure allows the client freedom of movement and can be done at home or a birthing center
- Continuous electronic fetal monitoring is accomplished by securing an ultrasound transducer over the client's abdomen, which records the FHR and uterine contractions.

Subcategory: Postpartum disorders

Topic: Priority Nursing action for excessive blood loss

- Postpartum hemorrhage is considered to occur if the client loses more than 500 mL of blood after a vaginal birth or more than 1,000 mL of blood after a cesarean birth.
- Determine QBL immediately following birth.
- Assess bladder for distention. Insert an indwelling urinary catheter to assess kidney function and obtain an accurate measurement of urinary output.
- Uterine atony results from the inability of the uterine muscle to contract adequately after birth. This can lead to postpartum hemorrhage.

Subcategory: Postpartum physiological adaptations

Topic: Nursing action for vaginal bleeding following a Cesarean Birth

- The main goal during the immediate postpartum period is to prevent postpartum hemorrhage.
- The postpartum period, also known as the puerperium, includes physiological and psychological adjustments.
- Traditionally this has been considered to last 6 weeks, this time frame varies among postpartum clients.

Main Category: Physiological Adaptation

Subcategory: Assessment and management of newborn complications

Topic: Planning care for a newborn who has a myelomeningocele

- A nurse should provide emotional support to the parents whose newborn is facing procedures or surgeries to correct the defects.
- Congenital anomalies are generally identified soon after birth by Apgar scoring and a brief assessment indicating the need for further investigation.
- Nursing interventions for congenital anomalies are dependent upon the type and extent of the anomaly.

Main Category: Clinical Judgment

Subcategory: Postpartum Physiological Adaptations

Topic: Identifying client findings that require immediate follow-up during a postpartum assessment

- The main goal during the immediate postpartum period is to prevent postpartum hemorrhage.
- Lactating and nonlactating clients differ in the timing of the first ovulation and the resumption of menstruation.
- Postpartum assessments immediately following birth include monitoring vital signs, uterine firmness and its location in relation to the umbilicus, uterine position in relation to the midline of the abdomen, and amount of vaginal bleeding.

Subcategory: Postpartum infections

Topic: Caring for a client who is experiencing a complication following a Cesarean birth

- The immediate postpartum period following birth is a time of increased risk for all clients for microorganisms entering the reproductive tract and migrating into the blood and other parts of the body, which can result in life-threatening septicemia.
- Endometritis is an infection of the uterine lining or endometrium. It is the most frequently occurring puerperal infection.
- Sites of wound infections include cesarean incisions, episiotomies, lacerations, and any trauma wounds present in the birth canal following labor and birth.

Subcategory: Bleeding during Pregnancy

Topic: Caring for a client who is at 28 weeks of gestation

- Types of abortion are clinically classified according to manifestations and whether the products of conception are partially or completely retained or expelled.
- Notify the provider of heavy, bright red vaginal bleeding; elevated temperature; or foul-smelling vaginal discharge.
- Ectopic pregnancy is the abnormal implantation of a fertilized ovum outside of the uterine cavity usually in the fallopian tube, which can result in a tubal rupture causing a fatal hemorrhage.