

N432 Newborn Worksheet

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Date: 9/2/2024

This assignment is due at 2359 CST the evening before you are assigned to the nursery.

Complete table (40 points) Include in-text citations in APA format. Attach Reference page.

Area	Normal Findings	Expected Variations
Skin	<ul style="list-style-type: none"> • Skin is pink and warm with cyanosis of hands and feet (<i>Durham et al., 2023</i>). • Milia are present on the bridge of the nose and chin (<i>Durham et al., 2023</i>). • Lanugo is present on the back, shoulders, and forehead (<i>Durham et al., 2023</i>). • Slate gray patches (<i>Durham et al., 2023</i>). 	<ul style="list-style-type: none"> • Peeling or cracking is often noted on infants less than 40 weeks gestation (<i>Durham et al., 2023</i>). • Hemangiomas such as salmon-colored patch, nevus flammeus, and strawberry hemangiomas are developmental vascular abnormalities (<i>Durham et al., 2023</i>).
Head	<ul style="list-style-type: none"> • Molding present (<i>Durham et al., 2023</i>). • The posterior fontanel is a triangle shape that is approximately 0.5-1 cm (<i>Durham et al., 2023</i>). • Fontanelles are open, soft, intact, and slightly depressed (<i>Durham et al., 2023</i>). 	<ul style="list-style-type: none"> • There are overriding sutures where there is increased molding (<i>Durham et al., 2023</i>). • May be difficult to palpate due to excessive molding (<i>Durham et al., 2023</i>).
Fontanelles	<ul style="list-style-type: none"> • Fontanelles are open, soft, intact, and slightly depressed (<i>Durham et al., 2023</i>). • The posterior fontanel is a triangle shape that is approximately 0.5-1 cm (<i>Durham et al., 2023</i>). 	<ul style="list-style-type: none"> • Fontanelles may bulge when infant is crying (<i>Durham et al., 2023</i>)
Face	<ul style="list-style-type: none"> • Symmetrical with no abnormalities (<i>Durham et al., 2023</i>) 	
Eyes	<ul style="list-style-type: none"> • Eyes are equal and symmetrical in size and 	<ul style="list-style-type: none"> • Edema may be present due to pressure during labor and

	<p>placement (<i>Durham et al., 2023</i>).</p> <ul style="list-style-type: none">• The neonate is able to follow objects within 12 inches of the visual field (<i>Durham et al., 2023</i>).• The iris is blue-gray or brown (<i>Durham et al., 2023</i>).• The sclera is white or bluish white (<i>Durham et al., 2023</i>).• Pupils are equally reactive to light (<i>Durham et al., 2023</i>).• Positive red light reflex and blink reflex are observed (<i>Durham et al., 2023</i>).• No tear production (<i>Durham et al., 2023</i>).	<p>birth or reaction to eye prophylaxis (<i>Durham et al., 2023</i>).</p> <ul style="list-style-type: none">• Subconjunctival hemorrhage may be present due to pressure during labor and birth (<i>Durham et al., 2023</i>).
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Nose	<ul style="list-style-type: none"> • Nares should be present (Durham et al., 2023) • Small amount of mucus is present (Durham et al., 2023). • Neonates primarily breathe through their nose (Durham et al., 2023). 	<ul style="list-style-type: none"> • The nose may be flattened or bruised related to the birth process (Durham et al., 2023).
Mouth	<ul style="list-style-type: none"> • Lips, gums, tongue, palate, and mucous membranes are pink, moist, and intact (Durham et al., 2023). • Reflexes are positive. • Epstein's pearls are present (Durham et al., 2023). 	<ul style="list-style-type: none"> • Dry lips are common after birth. (Durham et al., 2023)
Ears	<ul style="list-style-type: none"> • Top of the pinna is aligned with the external canthus of the eye (Durham et al., 2023). • Pinna is without deformities, well-formed and flexible (Durham et al., 2023). • The neonate responds to noises with positive startle signs (Durham et al., 2023). • Hearing becomes more acute as eustachian tubes clear (Durham et al., 2023). • Neonates respond more readily to high-pitches vocal sounds (Durham et al., 2023). 	
Neck		<ul style="list-style-type: none"> • Positive tonic neck reflex

	<ul style="list-style-type: none">• The neck is short with skin folds (Durham et al., 2023).	may be present (Durham et al., 2023).
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Chest	<ul style="list-style-type: none"> • The chest is barrel shaped and symmetrical (Durham et al., 2023). • Clear or milky fluid from nipples related to maternal hormones (Durham et al., 2023). 	<ul style="list-style-type: none"> • Breast engorgement may be present in both male and female neonates related to maternal hormones and resolves within a few weeks (Durham et al., 2023).
Breath Sounds	<ul style="list-style-type: none"> • Lung sounds are clear and equal (Durham et al., 2023). 	<ul style="list-style-type: none"> • Scattered crackles may be detected during the first few hours after birth. This is due to retained lung fluid which will be absorbed through the lymphatics (Durham et al., 2023).
Heart Sounds	<ul style="list-style-type: none"> • Point of maximal impulse at the third or fourth intercostal space (Durham et al., 2023). • S1 and S2 are present (Durham et al., 2023). • Brachial and femoral pulses are present and equal (Durham et al., 2023). 	<ul style="list-style-type: none"> • Regular rhythm with some variability related to activity and respiratory changes (Durham et al., 2023). • Murmurs in 30% of neonates which disappear within 2 days of birth (Durham et al., 2023).
Abdomen	<ul style="list-style-type: none"> • The abdomen is soft, round, protuberant, and symmetrical (Durham et al., 2023). 	<ul style="list-style-type: none"> • Bowel sounds are present but may be hypoactive for the first few days. Passage of meconium stool within 48 hours post birth (Durham et al., 2023).
Bowel Sounds	<ul style="list-style-type: none"> • Bowel sounds are present (Durham et al., 2023). 	<ul style="list-style-type: none"> • Bowel sounds may be hypoactive for the first few days. Passage of meconium

		stool within 48 hours post birth (Durham et al., 2023).
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<p>Umbilical Cord</p>	<ul style="list-style-type: none"> • The cord is opaque or whitish blue with two arteries and one vein, and covered with Whartons jelly (Durham et al., 2023). • Skin around the umbilical cord should be assessed for infection and have no redness, swelling, drainage, or foul smell (Durham et al., 2023). • The cord becomes dry and darker in color within 24 hours post birth and detaches from the body within 2 weeks (Durham et al., 2023). 	
<p>Genitals</p>	<ul style="list-style-type: none"> • Female: Labia majora covers the labia and minora clitoris (Durham et al., 2023). • Labia majora and minora may be edematous (Durham et al., 2023). • Blood-tinged vaginal discharge is related to the abrupt decrease of maternal hormones (Durham et al., 2023). • Whitish vaginal discharge with urate crystals that appear as a red or rust colored stain on the diaper (Durham et al., 2023). • The neonate urinates within 24 hours (Durham et al., 2023). • The urinary meatus is 	<ul style="list-style-type: none"> • Labia majora and minora may be edematous (Durham et al., 2023). • Urine may appear dark with urate crystals that appear as a red, orange, pink, or rust colored stain on the diaper (Durham et al., 2023).

	<p>midline (Durham et al., 2023).</p> <ul style="list-style-type: none">• Male: The urinary meatus is at the tip of the penis (Durham et al., 2023).• The scrotum is large, pendulous, and edematous with rugae present (Durham et al., 2023).• Both testes are palpated in the scrotum (Durham et al., 2023).• The neonate urinates within 24 hours with an uninterrupted stream (Durham et al., 2023).	
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Anus	<ul style="list-style-type: none"> • The anus is patent (Durham et al., 2023). • Passage of stool within 24 hours (Durham et al., 2023). 	
Extremities	<ul style="list-style-type: none"> • Arms are symmetrical in length and equal in strength (Durham et al., 2023). • Legs are symmetrical in length and equal in strength (Durham et al., 2023). • 10 fingers and 10 toes. • Full range of motion is observed of all extremities (Durham et al., 2023). • No clicks at joints (Durham et al., 2023). • Equal gluteal folds (Durham et al., 2023). 	
Spine	<ul style="list-style-type: none"> • C shaped spine with no openings in felt or observed in vertebrae. No dimpling or sinuses are observed (Durham et al., 2023). 	

For the following questions and tables, include in-text citations in APA format. Attach Reference page.

1. What safety and security measure are in place at facilitates for newborns? **(5 points)**
Identification bracelets are put on the infant as soon as possible to ensure proper identification and the infant will also wear an electronic sensor that will alarm if the baby leaves the unit (Durham et al., 2023).
2. What is normal ranges for an infant's heart rate and respiratory rate? **(2 points)**

Normal range for infant heart rate is 110-160 bpm (Durham et al., 2023). The rate may increase to 180 with crying and may decrease to 90 when asleep. Normal respiratory rate is 30-60 bpm (Durham et al., 2023).

3. What is the normal range and method for getting an infant's temperature? Why is this? (2 points)

The normal range for temperature is 97.7-99 degrees Fahrenheit. Axillary temperatures are preferred in the hospital setting but rectal temperatures may also be done (Durham et al., 2023). Rectal temperatures are considered the most accurate. Temperatures may not be taken orally because the infant is not able to hold the probe in their mouth (Durham et al., 2023).

Complete Table (10 points)

Medication	Dosage	Administration Site	Possible side effects	Why is this administered
Vitamin K	0.5-1mg (Durham et al., 2023)	Thigh (Durham et al., 2023)	erythema, pain, and swelling at injection site (Durham et al., 2023).	Prevention of vitamin K deficiency bleeding (Durham et al., 2023).
Erythromycin	1 cm (Durham et al., 2023)	Eye (Durham et al., 2023)	Stinging, burning, redness, blurred vision, cloudy or moist eyes (Durham et al., 2023).	To prevent bacterial eye infections (Durham et al., 2023).
Hepatitis B	0.5 mL (Durham et al., 2023)	Thigh (Durham et al., 2023)	Pain, redness, or swelling at injection site, low grade fever, tiredness (Durham et al., 2023).	To help prevent hepatitis B (Durham et al., 2023).

Complete Table (20 points)

Name of Test	Why is this test ordered
Blood Glucose	Low blood sugar can cause brain injury and developmental disabilities if left untreated (Durham et al., 2023).
Blood type and Rh Factor	Blood type and Rh factor are tested on newborns to determine if there is any incompatibility with the

	mothers blood type (Durham et al., 2023).
Coombs Test	To detect antibodies that may be attaching the baby's red blood cells (Durham et al., 2023).
Bilirubin levels	Extreme levels of bilirubin can be toxic and cause acute bilirubin encephalopathy or kernicterus (Durham et al., 2023).
Newborn Screen	To detect developmental or genetic disorders (Durham et al., 2023).
Hearing Screen	Early detection of hearing loss provides parents with the opportunity to seek interventions that foster language development (Durham et al., 2023).
Newborn Cardiac Screen	To help identify critical congenital heart defects early so they can be treated (Durham et al., 2023).

1. Identify 3 educational topics that could be discussed with caregivers of the infant. **(6 points)**

Bathing the infant, umbilical cord care, and crying and colic (Durham et al., 2023).

2. Identify 2 nursing diagnoses that could be identified for a newborn patient. **(10 points)**

Risk for impaired nutrition related to ineffective breastfeeding as evidenced by infant not latching to mother (Phelps, 2023)..

Risk for ineffective airway clearance related to presence of mucus in mouth and nose at birth as evidenced by low O2 saturation (Phelps, 2023).

Attach Reference page:

Durham, R. F., Chapman, L. L., & Miller, C. S. (2023). *Maternal-Newborn Nursing* (4th ed.). F.A. Davis Company.

Phelps, L. L. (2023). *Nursing diagnosis reference manual* (12th ed.). Wolters Kluwer.