

N432 Postpartum Worksheet

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Describe the nursing assessment of the postpartum patient in table (15 points) **Include in-text citations in APA format for entire assignment.**

	What area is being assessed?	Normal findings
B	Breast <ul style="list-style-type: none"> - The nurse assesses for signs of engorgement of the breast: tender, firm, warm, or enlarged (Durham et al., 2023). The nurse also assesses the nipples (Durham et al., 2023). 	Breastfeeding Women <ul style="list-style-type: none"> - First 24 hours: soft and non-tender (Durham et al., 2023). - Day 2: slightly firm and non-tender (Durham et al., 2023). - Day 3: firm, tender, and warm to touch (Durham et al., 2023). - Nipples are intact with no signs of irritation and tissue breakdown (Durham et al., 2023). Nonbreastfeeding Women <ul style="list-style-type: none"> - First 24 hours: soft and non-tender (Durham et al., 2023). - Day 2: slightly firm and non-tender (Durham et al., 2023). - Day 3: firm and tender (Durham et al., 2023). - Nipples are intact with no signs of irritation and tissue breakdown (Durham et al., 2023).
U	Uterus <ul style="list-style-type: none"> - The nurses assess the uterine fundus to ensure involution (Durham et al., 2023). 	Uterine fundus: descends 1 cm per day (Durham et al., 2023). <ul style="list-style-type: none"> - Immediately after birth – palpated midway between umbilicus and symphysis pubis, firm and midline (Durham et al., 2023). - 12 hours after – palpated at umbilicus or 1 cm above, firm and midline (Durham et al., 2023). - 24 hours after – palpated 1 cm below umbilicus, firm and midline (Durham et al., 2023). - Day 14 – descended into pelvis and not palpable (Durham et al., 2023).
B	Bowel <ul style="list-style-type: none"> - The nurse assesses bowel sounds, function, nutrition, 	Active bowel sounds (Durham et al., 2023). Constipation but bowel function should return to normal on days 2 to 3 (Durham et al., 2023).

	and weight loss (Durham et al., 2023).	Increased appetite (Durham et al., 2023). Weight loss (Durham et al., 2023). - Immediately after birth: 11 to 12 lbs from delivery and blood loss (Durham et al., 2023). - Diuresis: possibly 5 to 8 lbs (Durham et al., 2023).
B	Bladder - The nurse assesses bladder distention, urinary output, and abnormal urinary symptoms (Durham et al., 2023).	Void at least 300 mL within 2 to 4 hours of delivery (Durham et al., 2023). No frequency, urgency, or burning on urination (Durham et al., 2023). No bladder distention (Durham et al., 2023).
L	Lochia - The nurse assesses the discharge (Durham et al., 2023).	Stage 1: Lochia rubra (Days 1-3) (Durham et al., 2023). - Red and bloody with small clots, moderate to scant amount, fleshy odor, increased flow when standing or breastfeeding (Durham et al., 2023). Stage 2: Lochia serosa (Days 4-10) (Durham et al., 2023). - Pink or brown color, scant amount, fleshy odor, increased flow with physical activity (Durham et al., 2023). Stage 3: Lochia alba (Day 10) (Durham et al., 2023). - Yellow to white color, scant amount, fleshy odor (Durham et al., 2023).
E	Episiotomy/Perineum - The nurse assesses the perineum for lacerations, swelling, bruising, pain, redness or bleeding (Durham et al., 2023). Also, assess that the edges of the episiotomy are approximated if one was performed (Durham et al., 2023).	Mild edema, minor bruising, mild to moderate pain, and approximation of wound edges of the episiotomy or laceration (Durham et al., 2023).

H	Homan's sign - The nurse assesses for signs of a deep vein thrombosis (Durham et al., 2023).	No tenderness, redness, edema, or sensation of warmth in the calves (Durham et al., 2023). Negative Homan's sign (Durham et al., 2023).
E	Extremities - The nurse assesses lower extremity sensation (Durham et al., 2023).	Mild to no muscle soreness (Durham et al., 2023). No epidural: Full sensation of lower extremities (Durham et al., 2023). Epidural: Diminished lower body sensation with full sensation returning within a few hours after delivery (Durham et al., 2023). - Ambulation is delayed or with assistance until full sensation is returned (Durham et al., 2023).
D	Diastasis recti abdominis - The nurse assesses the rectus muscle of the abdomen (Durham et al., 2023).	Rectus muscle is separated and felt with palpation (Durham et al., 2023). - Normal separation and will diminish with time (Durham et al., 2023).

1. Identify 3 patient education topics that a postpartum patient would require. How would you educate the patient on each topic? **(15 points)**

I would educate the women on the importance of attending their postpartum visits. During these visits, the provider will complete a complete physical, social, and psychological assessment and screen for postpartum depression (Durham et al., 2023). These visits can also help the women with any questions and educate them on what signs and symptoms they may be experiencing are normal or abnormal (Durham et al., 2023). I would help the women find resources if they struggle with costs, transportation, or other things. I would also educate them about nutrition. If the woman is lactating, she will need to increase her calorie intake by 500 to 1000 calories daily and 2 to 3 liters of fluid daily (Durham et al., 2023). If anemic, she can increase her intake of leafy green vegetables, red meat, iron-fortified cereal, or bread (Durham et al., 2023). They should also increase their fruit, vegetables, or fiber intake to prevent constipation (Durham et al., 2023). I would give them handouts or show them how to use MyPlate to help with their nutritional intake. Lastly, I would educate them on performing moderate intensive activities like brisk walking (Durham et al., 2023). This can also help decrease their risk of constipation and help circulation (Durham et al., 2023). Also, performing Kegel exercises to help strengthen their pelvic floor (Durham et al., 2023). I would give them handouts showing the exercises and what activities they can do.

2. Define postpartum hemorrhage. What intervention would be completed? **(10 points)**

Postpartum hemorrhage is the loss of more than 500 mL of blood for vaginal deliveries and more than 1,000 mL for cesarean deliveries with a 10% drop in hemoglobin or hematocrit (Durham et al., 2023). The nurse should assess the fundus and lochia every hour for the first 4 hours after delivery (Durham et al., 2023). They should also educate the woman on assessing their fundus, preventing bladder distention, and the signs of postpartum hemorrhage (Durham et al., 2023). The nurse should also increase the woman's fluid intake to decrease the risk of hypovolemia and review H&H labs (Durham et al., 2023).

3. What is the primary cause of uterine subinvolution? What interventions would be done to alleviate this issue? **(5 point)**

Subinvolution can be caused by retained placental fragments, infection, or an overdistended uterus (Durham et al., 2023). A dilation and curettage is performed to remove the retained placental fragments (Durham et al., 2023). IV antibiotics are given if an infection is the cause (Durham et al., 2023).

4. What is Rhogam? Why is this given to a postpartum patient? **(5 points)**

Rhogam is a medication given to Rh-negative women to prevent isoimmunization due to the risk of exposure to Rh-positive fetal blood (Durham et al., 2023). It is given at 26 to 28 weeks and given again after delivery if the infant is Rh-positive (Durham et al., 2023).

5. Identify 2 nursing diagnoses for a postpartum patient. **(10 points)**

Two nursing diagnoses that could be used for a postpartum patient are risk for bleeding related to uterine atony as evidenced by no uterine contractions (Durham et al., 2023) and impaired mobility related to epidural effects as evidenced by diminished lower body sensation (Durham et al., 2023).

6. Define mastitis. How is this prevented? **(5 points)**

Mastitis is the inflammation or infection of breast tissue, usually occurring in one breast (Durham et al., 2023). The risk of mastitis can be reduced by completely emptying the breast, knowing proper latch-on technique, and regularly breastfeeding (Durham et al., 2023).

7. Identify 3 nursing interventions for the perineal area for the postpartum patient. Explain why each of these interventions are important. **(10 points)**

Ice can be applied to the perineum during the first two days to help reduce any swelling present (Durham et al., 2023). This can help alleviate some discomfort from the patient. Also, advising the woman to lay on her side to remove pressure from the perineum (Durham et al., 2023). The nurse should also instruct the woman to rinse after elimination using the peri-bottle with warm water and changing her peri pads frequently (Durham et al., 2023). This can help reduce the risk of infection (Durham et al., 2023).

8. What 3 nursing interventions are completed to prevent a thromboembolic condition? **(10 points)**

Three nursing interventions that should be completed to prevent thromboembolic conditions are early ambulation, applying compression stockings, and instructing the women not to cross their legs (Durham et al., 2023).

Complete table (15 points) Include in-text citations in APA format

Mood Disorder	Definition	Signs and Symptoms
Baby Blues	Postpartum blues occur during the first two weeks postpartum, causing the woman to feel sad and cry easily (Durham et al., 2023). However, she can still care for herself and her baby (Durham et al., 2023).	Sadness, crying, mood swings, anger, anxiety, difficulty sleeping and eating are the signs and symptoms of postpartum blues (Durham et al., 2023).
Postpartum Depression	Postpartum depression is a mood disorder characterized by severe depression that occurs during the first 12 months postpartum (Durham et al., 2023).	Some of the signs and symptoms include sleep/appetite difficulties, abnormal fatigue, uncontrolled crying, anxiety, fear, inability to concentrate or make decisions, feelings of guilt, worthlessness, hopelessness, inability to care for self or baby, decreased responsiveness to baby, decreased affectionate contact with the baby, thoughts of harming baby or self (Durham et al., 2023, p. 471).
Postpartum Psychosis	Postpartum psychosis is a brief psychotic disorder that has a peripartum onset (Durham et al., 2023).	Some of the symptoms a woman can experience are delusions, hallucinations, paranoia and strange beliefs, disorganized behavior and speech, mood swings, depressed or elated moods, and extreme agitation (Durham et al., 2023).

References

Durham, R., Chapman, L., & Miller, C. (2023). *Davis advantage for maternal-newborn nursing: Critical components of nursing care* (4th ed.). F.A. Davis.