

Postpartum Clinical Experience Summary

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The priority nursing diagnosis for the patient that I was assigned to is excess fluid volume related to heart failure as evidenced by peripheral edema, weight gain, and administration of Lasix (Phelps, 2023). I chose this nursing diagnosis due to the heart failure delaying the patient's recovery from her cesarean section. The patient had begun Lasix and had lost 16 pounds of fluid since she started the medication. The patient's legs were very swollen, causing her difficulty with ambulation. She was also fatigued and had trouble ambulating by herself due to that fatigue, pain from her incision, swollen legs, and orthostatic hypotension, causing her to be dizzy. This caused her to want to stay in bed and not ambulate. However, the nurse explained that the sooner she ambulates, the better she will feel and heal faster.

One nursing intervention that should be done is strict input and output monitoring (Phelps, 2023). This can help determine if her fluid overload is improving and help guide the diuretic therapy she is on (Phelps, 2023). It can also help monitor whether she is losing too much fluid or not enough (Phelps, 2023). Another intervention that should be done is monitoring her electrolytes, specifically potassium (Phelps, 2023). Lasix is a potassium-wasting diuretic, so careful monitoring and supplementation should be done to ensure it stays at normal levels (Jones & Bartlett Learning, 2023). A third intervention that should be done is to put the patient on a sodium-restriction diet (Phelps, 2023). Sodium retains fluid in the body; therefore, sodium should be restricted to help lower the excess fluid in her body.

The patient was on a strict input and output monitoring order. Everything she ate and drank was carefully monitored (Phelps, 2023); she would drink her water out of a cup with measurements on the side to document the exact amount she had drank. The patient had a catheter, so the collection bag was emptied and measured to ensure she lost an appropriate

amount of fluid. She was also on a sodium restriction diet. Although she was on this restricted diet, it did not seem to affect her dietary intake. Due to her being on Lasix, she is at risk of her potassium levels dropping (Jones & Bartlett Learning, 2023). She was prescribed potassium supplementation, and her labs were also carefully monitored. The patient was not happy about having so many medications to take, but she did not refuse any. She also expressed that she could not wait to be done with the Lasix infusion.

The patient's culture is part of the mothers who prefer breastfeeding over formula feeding. The patient wanted to breastfeed her newborn strictly and did not want to use any formula. She also wanted the lactation consultant to help her with breastfeeding and educate her on how to hold her baby correctly. However, a barrier prevented the mother and staff from accommodating her preferences and culture. The mother was not producing enough breast milk for her baby. The nurses were willing to let the mother keep trying; however, if the baby's blood sugar dropped, the baby must be fed formula. The mother was unhappy but understood that this must be done to keep her baby healthy.

During this clinical, the one thing that put me outside of my comfort zone was having a newborn as one of our patients. I have not been around many newborns or cared for one before. It is entirely different when you provide care for the newborn. Not only do you care for the newborn, but you also care for the mother, so you have two patients. It was also interesting to see the coordination between the healthcare team in providing care for the mother, father, and baby. The nursery nurse would run tests and help provide care for the baby. A nurse practitioner would come and round on all the newborns and perform assessments. A lactation consultant would also come in and educate the mothers on breastfeeding and show the fathers how to clean the breast pump parts. Overall, it was a different and exciting experience that I enjoyed. It made me realize

that there is still so much to learn and so many other roles that nurses must play, depending on the specialty they choose to pursue.

References

Jones & Bartlett Learning. (2023). *NDH: Nurse's drug handbook*. Jones & Bartlett Learning.

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