

Main Category: Management of Care

Main Category: Safety and Infection Control

Subcategory: Accident/Error/Injury Prevention

Topic: Nursing Care and Discharge Teaching: Evaluating Understanding of Car Seat Safety

- * Their care seat needs to be a rear-facing car seat. It needs to be placed in the back.
- * Preferably, the car seat should be in the middle of the back row away from the airbags.
- * Keep infants in rear-facing care seats until they are two or until the child reaches maximum height and weight for the seat.

Main Category: Health Promotion and Maintenance

Subcategory: Ante-/Intra-/Postpartum and Newborn Care

Topic: Newborn Nutrition: Teaching About Early Indications of Hunger

- * An indication of hunger is hand to mouth or hand to hand movements.
- * An indication of hunger is sucking motions.
- * An indication of hunger is the rooting reflex.

Topic: Postpartum Disorders: Identifying Risk Factors for Postpartum Hemorrhage

- * One risk factor is uterine atony.
- * The second risk factor is prolonged labor and an oxytocin induced labor.
- * The third risk factor is an overdistended uterus.

Subcategory: Lifestyle choices

Topic: Contraception: Contraindications for Use of Oral Contraceptives

- * Do not take if there is a history of a stroke.
- * Do not take if patient has uncontrolled hypertension.
- * Do not take if pregnant.

Main Category: Psychosocial Integrity

Main Category: Basic Care and Comfort

Subcategory: Nonpharmacological Comfort Interventions

Topic: Pain Management: Nonpharmacological Methods

- * Moms can use aromatherapy.
- * Moms can participate in breathing techniques.
- * Moms can listen to music, which has a calming effect.

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Dosage Calculations

Topic: Dosage Calculation: Calculating a Dose of Misoprostol

- * Use the Desired X Quantity/ Have method.
- * Follow rounding rules, which is what I missed on this question.
- * Make sure to remember the common conversions, such as one milligram is 1,000 micrograms.

Subcategory: Medication Administration

Topic: Prenatal Care: Immunizations for a Client Who Is at 30 Weeks of Gestation

- * Patients should be educated about getting the flu vaccination.
- * The Tdap vaccination is given at twenty-seven to thirty-five weeks.
- * No live vaccines

Subcategory: Pharmacological Pain Management

Topic: Postpartum Physiological Adaptations: Planning Medication Administration for a Postpartum Client Following a Vaginal Birth

- * Oxytocin is administered to help improve the quality of the contractions.
- * Medications such as analgesics, NSAIDs, and opioids can be given for pain.
- * Topical anesthetics, such as benzocaine spray, can be used on the perineum.

Main Category: Reduction of Risk Potential

Subcategory: Diagnostic Tests

Topic: Assessment of Fetal Well-Being: Interpreting the Results of a Biophysical Profile

- * One thing it measures is their fetal heart rate. A score of two means the baby is reactive. A score of zero means the baby is nonreactive.
- * Another thing it measures is fetal breathing movements. At least one episode of greater than thirty seconds and within thirty minutes would score a two. Absent or less than thirty second duration would score a zero.
- * At least three body or limb extensions with return to flexion in thirty minutes would score a two. Less than three episodes would be a zero.

Topic: Fetal Assessments During Labor: Monitoring the Fetal Heart Rate During Labor

- * Change of position is encouraged.
- * Fetal heart baseline variability is described as fluctuations in the fetal heart rate baseline that are irregular in frequency and amplitude.
- * Absent or undetectable variability is considered nonreassuring.

Main Category: Physiological Adaptation

Subcategory: Alterations in Body Systems

Topic: Labor and Delivery Processes: Priority Action to Take Following Rupture of Membranes

- * After membranes have been ruptured, the nurse needs to assess the FHR for abrupt decelerations.
- * This is important because it can show fetal distress, which can be caused by an umbilical cord prolapse.
- * Prolonged rupture of membranes greater than twenty-four hours before birth of baby can lead to an infection.

Subcategory: Unexpected Response to Therapies

Topic: Nursing Care During Stages of Labor: Nursing Interventions for Umbilical Cord Prolapse

- * Important to start assessing fetal heart rate to ensure an umbilical cord prolapse is not causing nonreassuring heart tones.

- * A cesarean birth is typically done right away to get the baby out.
- * Continually monitor the fetal heart rate to assess the baby's condition.

Main Category: Clinical Judgement

Subcategory: Analyze Cues

Topic: Assessment and Management of Newborn Complications: Analyzing Cues

- * Neonates who are withdrawing will have a high-pitched cry and be extremely irritable.
- * They will be congested, sweaty, and experience tachypnea.
- * They will not eat well. If they do eat, they will vomit it back up.

Topic: Early Onset of Labor: Prioritizing Care for a Client Who Has Preterm Labor

- * Make sure to encourage them to be hydrated.
- * Keep them on strict bed rest with minimal movement.
- * Have them lay in the left lateral position to encourage blood flow to the uterus.

Topic: Medical Conditions: Interpreting Findings for a Client Who Is Experiencing Preterm Labor

- * The mom will feel uterine contractions.
- * They may experience vaginal discharge.
- * They may urinate frequently.

Topic: Postpartum Physiological Adaptations: Rh Factor Administration

- * They will receive an IM injection of RhoGam within 72 hours of delivery.
- * Observe them for at least 20 minutes after giving the shot to watch for an allergic reaction.
- * The nurse should check to see if the client has not been sensitized before administering RhoGam immune globin.

Subcategory: Prioritize Hypotheses

Topic: Early Onset of Labor: Prioritizing Care for a Client Who Is Experiencing Preterm Labor

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Subcategory: Generate Solutions

Topic: Early Onset of Labor: Interventions for Client Who Has a Preterm Labor

- * Administer betamethasone
- * Monitor fetal heart rate
- * Strict bedrest

Subcategory: Take Actions

Topic: Assess and Management of Newborn Complications: Interventions for a Newborn Who Has Neonatal Abstinence Syndrome

- * Decrease environmental stimuli.
- * Swaddle the newborn to reduce self-stimulation and protect the skin from abrasions.
- * Administer frequent, small feedings of high calorie formula.

Subcategory: Evaluate Outcomes

Topic: Early Onset of Labor: Evaluating Client Response to Magnesium Sulfate Therapy for Preterm Labor

- * Stop medication if there are signs and symptoms of pulmonary edema, chest pain, shortness of breath, crackles or wheezing, or blood-tinged sputum.
- * Monitor for adverse effects, such as hot flashes, nausea, vomiting, and blurred vision.
- * Monitor for magnesium toxicity, such as loss of deep tendon reflexes, respirations less than twelve, or hypotension.