N432 Newborn Care Plan

Lakeview College of Nursing

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N432 Newborn Care plan

Instructions: The care plan is to be typed into a WORD document and submitted to the Newborn Drobox within 72 hours after your clinical has ended. Be sure and compare your work with the attached rubric before submitting this to the dropbox. The care plan is worth 150 points. In order to pass you must achieve at least 116 points to acquire a pass. If you do not pass, you will have one opportunity to do a newborn care plan on a different patient. You must pass the care plan in order to pass your clinical and thus your course.

DEMOGRAPHICS (10 points)

Date/time of clinical assessment 09/11/2019 @ 1730

Date/time of birth 09/11/2019	**Patient Initials** JD	**Age at time of assessment in hours.** 11 hours	**Gender** Female
Race/Ethnicity White	**Weight at birth** (gm) 3020 . (lb.) 6 (oz.) 12 .	**Weight at time of assessment*** The baby was not weighed a second time during clinical hours.	**How old was the infant when weighed last (In hours).** Within the first hour of birth.
Length at birth Cm 48.3 . Inches 19 .	**Head circumference at birth** Cm 32 . Inches 12.6 .	**Chest Circumference at birth** Cm 31.1 . Inches 12.3 .	

- **There are times when the weight at the time of your assessment will be the same as at birth.**

MOTHER/FAMILY MEDICAL HISTORY (15 points)

Prenatal History of the mother

When Prenatal care started 02/26/19 .
Abnormal Prenatal labs/diagnostics None .
Prenatal complications Some pubic symphysis pain.
Smoking/Drugs in pregnancy None .

Labor History of Mother

- Gestation at onset of labor 36 weeks .
- Length of labor 6 hours 33 minutes .
- ROM Membrane ruptured at 2300 on 09/10/19
- Medications in labor Penicillin and epidural
- Complications of labor & delivery Preterm labor .

Family History

- Pertinent to infant mother had gestational diabetes during pregnancy

Social History

- Pertinent to infant None
- Father/co-parent of baby involvement? Father and mother are married and living together
- Living situation Family lives in one story house in Arcola with a good support system.
- Education level of parents Both parents have college education.

If applicable to parents' learning barriers or care of infant No apparent learning barriers

Birth History

- Length of Second stage labor 35 minutes
- Type of Delivery vaginal .
- Complications of birth preterm delivery
- APGAR scores **1 minute** - 8 **5 minutes** - 9 **10 minutes** - not performed .
- Resuscitation methods beyond the normal needed full code – all resuscitation methods

FEEDING TECHNIQUES (8 points)

Feeding technique type Exclusively breastmilk .

If breastfeeding, LATCH score 2 .

If bottle feeding, positioning of bottle, suck strength, amount no bottle feeding .

Percentage of weight loss at time of assessment (**Show your calculations; if today's weight is not available please show how you would calculate weight loss i.e. show the formula**). Today's weight is not available. Calculation: weight loss/birthweight = percent weight loss.

What is normal weight loss for this age infant? A weight loss of 7-10% is normal for breastfed newborns.

Is this neonate's wt. loss within normal limits? A second weight was not obtained, so the weight loss is unknown.

INTAKE AND OUTPUT (8 points)

Intake

If breastfeeding: feeding frequency, length of feeding session, one or both breasts? Every 3 hours, lasts 30 minutes, using both breasts.

If bottle feeding: frequency and volume of formula at a session. Not bottle feeding .

If NG or OG feeding: frequency & volume No NG or OG feeding .

If IV: then rate of flow and volume in 24 hours no IV .

Output

Age (in hours) of first void 5 hours .
Voiding patterns: (# of times/24 hours) 3 times .

Age (in hours) of first stool 12 hours .
Stools: (type, color, consistency and number of times in 24 hours) meconium, blackish/green, 2 times .

NEWBORN LABS AND DIAGNOSTICS TESTS (15 Points)

Highlight All Abnormal Lab results.

Name of test	**Why was this test ordered for *this* client? Complete this even if these labs have not been completed.**	**Client's results**	**Expected results**	***Interpretation of* this *client's results***
Blood glucose levels	Infant was premature, blood levels may be out of range	74 mg/dL	>40 mg/dL	Within normal limits
Blood type and Rh factor	To compare the baby's blood type with the mother's	B+	B+	No compatibility issues
Coombs test	To test for an autoimmune hemolytic reaction	Lab not completed	Lab not completed (negative results are expected)	Lab not completed
Bilirubin level (all babies at 24 hours)	To monitor liver development or to check if red blood cells are being destroyed quicker than normal due to hemolysis.	Lab not completed	Lab not completed	Use www.bilitool.org to "plug in" your baby's 24-hour bilirubin level. Discuss baby's risk according to this website. If your infant has not had a biliscan (TCB) or bili serum drawn, talk with your instructor and she will provide you with a number to use. Copy and paste the risk factor webpage stating your infant's risk status and include it at the end of this document.
Newborn Screen (at 24 hours)	This is a screening performed shortly after birth to detect birth conditions that are not evident in newborns	Not available until after discharge	Not completed	Not available until after discharge
Newborn Hearing Screen	To ensure fully functional hearing at birth	Hearing intact	Hearing intact	Expected findings
Newborn Cardiac Screen (at 24	Used to detect congenital cardiac	Procedure not completed	Passed screen	Procedure not completed

hours)	defects			

NEWBORN MEDICATIONS (15 Points)

Brand/Generic	**Aquamephyton (Vitamin K)** (Jones & Bartlett Learning, 2018)	**Illotycin (Erythromycin ointment)** (Jones & Bartlett Learning, 2018)	**Hepatitis B Vaccine** (Jones & Bartlett Learning, 2018)		
Dose	1 mg	0.5 %	0.5 mg		
Frequency	Once	Once	Once		
Route	Intramuscular	Topical (ointment)	Intramuscular		
Classification	Vitamin	Antibiotic	Vaccine		
Mechanism of Action	Vitamin used for the synthesis of clotting factors	Binds to bacterial ribosome. Used for prophylaxis of conjunctivitis	Hepatitis B antigen is given to provide immunity		
Reason Client Taking	Prophylactic hemorrhage of newborn	Prophylactically used to prevent conjunctivitis.	Hepatitis B prevention		
Contraindications (2)	Hypersensitivity Concurrent use of blood thinners	Hypersensitivity Concurrent use of astemizole	Hypersensitivity Yeast allergy		
Side Effects/Adverse Reactions (2)	Metabolic acidosis Cardiac arrest	Diarrhea Anaphylaxis	Injection site irritation Fever		

Nursing Considerations (2)	Use NS for dilution Takes 1-2 hours to take effect	Use 1cm ribbon for each eye Don't administer directly into eye with tip	Don't mix with other vaccines Shake before use		
Key Nursing Assessment(s)/Lab(s) Prior to Administration	Monitor bleeding Monitor platelets	Monitor for hypersensitivity Monitor heartrate and rhythm	Monitor for fever Monitor injection site		
Client Teaching needs (2)	Report rashes Teach side effects	Monitor for SE Review why we use ointment	Review vaccine schedule Monitor fever		

Reference:
Jones & Bartlett Learning. (2018). *2018 Nurses drug handbook*. Burlington, MA.

VITAL SIGNS (6 points)

Vital Signs at Birth	**Vital signs 4 hours after birth**	**At the time of your Assessment**
T 98.1 F	T 97.7 F	T 98.3 F
P 120	P 136	P 124
R 38	R 32	R 30

NEWBORN ASSESSMENT (25 Points)

Area	**Your Assessment**	**Expected Variations And Findings** (Ricci, Kyle, & Carman, 2017)	**If assessment finding different from expectation what is the clinical significance?**
Skin	Normal color, no jaundice or rashes noted	Smooth & flexible with color consistent with genetic background	No abnormal findings
Head	Normocephalic, diamond shaped anterior fontanelle and no abnormalities	Varies with gender, age, and ethnicity. Symmetrical and normocephalic	No abnormal findings
Fontanels	Anterior fontanelle open, soft, and flat. Posterior fontanelle opened and triangular.	Diamond shaped anterior fontanelle, triangular shaped posterior fontanelle.	No abnormal findings

Face	Full cheeks with no abnormalities	Full cheeks, symmetrical facial features	No abnormal findings
Eyes	Normally set, pupils equal, red reflex present bilaterally	Clear and symmetrical, may have uncoordinated movement or strabismus	No abnormal findings
Nose	Nares patent, no septal deviation	Small, midline, narrow and able to smell.	No abnormal findings
Mouth	Oral mucosa moist, palate normal shape and intact.	Intact with symmetrical movement. Gums pink, moist, natal teeth may be present	No abnormal findings
Ears	Normally set with patent canals	Soft, pliable and recoil quickly. Aligned with outer canthus of eye	No abnormal findings
Neck	Supple, without masses	Supple, without masses.	No abnormal findings
Chest	Symmetrical with no abnormalities	Barrel shaped, symmetric	No abnormal findings
Breath sounds	Vesicular breath sounds in all fields. Symmetric and slightly irregular.	Vesicular breath sounds in all fields. Symmetric and slightly irregular.	No abnormal findings
Heart sounds	Normal S1 and S2, no S3 noted. Heartrate within normal range	Normal S1 and S2, no S3 noted. Heartrate within normal range	No abnormal findings
Abdomen	Protuberant contour, soft, three vessels in umbilical cord	Protuberant contour, soft, three vessels in umbilical cord.	No abnormal findings
Bowel sounds	Bowel sounds heard in all quadrants	Bowel sounds heard in all quadrants	No abnormal findings
Umbilical cord	Umbilical vein larger than two arteries	Umbilical vein larger than two arteries	No abnormal findings
Genitals	Small skin tag noted on labia majora. Swollen	Swollen genitals as a result of estrogen, no bleeding or	Skin tag is benign with no clinical significance.

	genitals as a result of estrogen, no bleeding or redness	redness.	
Anus	Normal position. Patent as noted meconium patency at 10 hours.	Normal position and patency indicated by the passing of meconium.	No abnormal findings
Extremities	Extremities symmetric with free movement. No abnormalities	Extremities symmetric with free movement.	No abnormal findings
Spine	Spine symmetrical and palpable along entire length.	Spine palpable along entire length with not lateral curvature.	No abnormal findings
Safety Matching bands with parents Hugs tag Sleep position	Matching parental bands, hugs tag on foot, baby sleeps on back and swaddled.	Matching parental bands, hugs tag on foot, baby sleeps on back and swaddled	No abnormal findings

Reference:

Ricci, S. S., Kyle, T., & Carman, S. (2017). *Maternity and pediatric nursing*. Philadelphia: Wolters Kluwer.

Complete the Ballard scale grid at the end to determine if this infant is SGA, AGA or LGA (Show your work)? What was your determination? **AGA**

Are there any complications expected for a baby in this classification? (Discuss)

No complications expected for this baby.

PAIN ASSESSMENT (2 Points)

Pain Assessment including which pain scale you have used. 0 – NIPS scale

SUMMARY OF ASSESSMENT (4 points)

Discuss the clinical significance of the findings from your physical assessment. Note the example here:

This neonate was delivered on 9.11.19 at 0613 by normal spontaneous vaginal delivery (NSVD). Nuchal card x 1. Apgar scores 8/9 and no score at 10 minutes charted. EDD 10.10.19 by ultrasound. Neonate is 36 weeks and one day and AGA. Prenatal hx complicated by premature delivery and gestational diabetes mellitus (diet controlled). Birth weight 6 pounds 12 ounces (3080 grams), 19 inches long (48.3 centimeters). Upon assessment all systems are within normal limits with a small skin tag noted on labia majora. Last set of vitals: 98.3 F/124/30 BS x 3 after delivery WNL with lowest being 54. Neonate had some difficulties latching, lactation consultant contributed difficulty with breastfeeding to neonate being tired. 20”/20” q 2 – 3 hrs. Bilirubin level was not performed yet and will be done at 24 hours. Neonate expected to be held for the next 48 hours and to see pediatrician in the office for first well baby check within 48 hours after discharge.

NURSING CARE/INTERVENTIONS (12 Points)

Teaching Topics (5 points)

Include how you would teach the information & an expected outcome

1. Mother refused any injections for the newborn, so I would teach importance of the newborn receiving hepatitis B and vitamin K injections. I would stress the importance of receiving the vitamin K injections since the infant's liver is not fully functioning yet, so the infant has an increased risk of hemorrhaging. I would inform the mother that the risk for complications related to receiving injections is very low.

2. The newborn is having latching issues, so I would teach the mother techniques to improve breastfeeding and support newborn nutrition. Latching can be increased by stroking the side of the newborn's cheek with the nipple, maintaining proper positioning of the newborn during feeding, and ensuring the newborn is sufficiently rested before feeding.

Nursing Interventions (5 points)

Include a rationale as to why the intervention is being provided to client

Nursing Interventions:

Provide hepatitis B and Vitamin K injections – improves newborn's clotting ability and provides immunity to hepatitis B virus

Perform hearing screening – ensure newborn's hearing is intact.

Perform handheld BiliChek within 24 hours of birth – monitor newborn's liver function and check to see if further bilirubin testing is needed.

Medical Treatments:

No medical interventions were performed.

PRIORITY NEWBORN NURSING DIAGNOSES (15 Points)

Identified Problem or potential problem	Expected Outcomes/Goals	Interventions	Goals/Outcomes Met/Not Met
Identify problems that are specific to this patient. Write 2 nursing diagnosis. In order of priority. Must include a related to (R/T) and an as evidenced by (AEB)	**Include an expected outcome for each intervention. What do you expect to happen when you implement each intervention? Expected outcomes should be specific and individualized for THIS patient. The expected outcomes/goals MUST be measurable..**	**Include 3-5 interventions for each problem. Interventions should be specific and individualized for THIS patient. Be sure to include a time interval when appropriate, such as "Assess vitals q 12 hours". Interventions could include assessment, client teaching, procedures and prn medications.. Include a rationale for each intervention and using APA format , list your sources.**	**Include whether the goal/outcome has been met or not met and why.** **Then write what you would do next.**
Diagnosis 1. **Risk for bleeding related to decreased vitamin K availability as evidence by mother's refusal of vitamin K injection.**	No signs of bruising will be noted each assessment. Vitals will be within normal limits with each assessment with no signs of hemorrhaging. Vitamin K will increase clotting ability of the blood and reduce the chances for hemorrhaging.	Observe for signs of bruising and report significant findings to health care provider. These assessments detect early signs of bleeding potential and abnormal bleeding sources. Monitor vital signs ever 12 hours. Monitoring vitals can detect early signs of hemorrhaging. Administer vitamin K as prescribed. Vitamin K is a cofactor that modifies clotting factors to provide a site for calcium binding which is an essential part of the clotting function (Swearingen, 2016).	**Met/Not Met?** Goals were not met. **Why?** The mother refused for her newborn to receive vitamin K injection for personal reasons. **What next?** Further education regarding the benefits of vitamin K should be taught to the parents.
Diagnosis 2. Risk for imbalanced nutrition related to newborn's difficulty latching as evidence by newborn's difficulty latching.	Infant will exhibit no signs of weight loss while admitted. The newborn will show normal latching patterns before discharge. The newborn will tolerate frequent feedings and not lose more than 10% of her weight.	Infant will be weighed ever 12 hours and significant findings will be reported to the healthcare provider. Weighing the newborn will provide an idea of the infant's nutrition status. Teaching concerning methods to promote newborn feeding will be taught to mother. Promoting latching will allow for adequate nutrition to the newborn. Provide 2 mL injection of breastmilk every 2 hours. Providing small frequent meals will reduce fatigue and improve intake (Swearingen, 2016).	**Met/Not Met?** Goals were met **Why?** The newborn tolerated frequent feedings, was weighed at 12 hours, and showed improvements with latching. **What next?** Make sure the mother follows up with the pediatrician at 48 hours concerning the latching issues.

Reference:

Swearingen, P. L. (2016). *All-in-one care planning resource: medical-surgical, pediatric, maternity & psychiatric nursing care plans*. Philadelphia, PA: Elsevier/Mosby.

Revised 5/14/19

Ballard Gestational Age scale

Neuromuscular Maturity

Score	−1	0	1	2	3	4	5
Posture							
Square window (wrist)	> 90°	90°	60°	45°	30°	0°	
Arm recoil		180°	140–180°	110–140°	90–110°	< 90°	
Popliteal angle	180°	160°	140°	120°	100°	80°	< 90°
Scarf sign							
Heel to ear							

Physical Maturity

Skin	Sticky, friable, transparent	Gelatinous, red, translucent	Smooth, pink; visible veins	Superficial peeling and/or rash; few veins	Cracking, pale areas; rare veins	Parchment, deep cracking; no vessels	Leathery, cracked, wrinkled
Lanugo	None	Sparse	Abundant	Thinning	Bald areas	Mostly bald	
Plantar surface	Heel-toe 40–50 mm: −1 < 40 mm: −2	> 50 mm, no crease	Faint red marks	Anterior transverse crease only	Creases anterior 2/3	Creases over entire sole	
Breast	Imperceptible	Barely perceptible	Flat areola, no bud	Stippled areola, 1–2 mm bud	Raised areola, 3–4 mm bud	Full areola, 5–10 mm bud	
Eye/Ear	Lids fused loosely: −1 tightly: −2	Lids open; pinna flat; stays folded	Slightly curved pinna; soft; slow recoil	Well curved pinna; soft but ready recoil	Formed and firm, instant recoil	Thick cartilage, ear stiff	
Genitals (male)	Scrotum flat, smooth	Scrotum empty, faint rugae	Testes in upper canal, rare rugae	Testes descending, few rugae	Testes down, good rugae	Testes pendulous, deep rugae	
Genitals (female)	Clitoris prominent, labia flat	Clitoris prominent, small labia minora	Clitoris prominent, enlarging minora	Majora and minora equally prominent	Majora large, minora small	Majora cover clitoris and minora	

Maturity Rating

Score	Weeks
−10	20
−5	22
0	24
5	26
10	28
15	30
20	32
25	34
30	36
35	38
40	40
45	42
50	44

CLASSIFICATION OF NEWBORNS (BOTH SEXES) BY INTRAUTERINE GROWTH AND GESTATIONAL AGE [1,2]

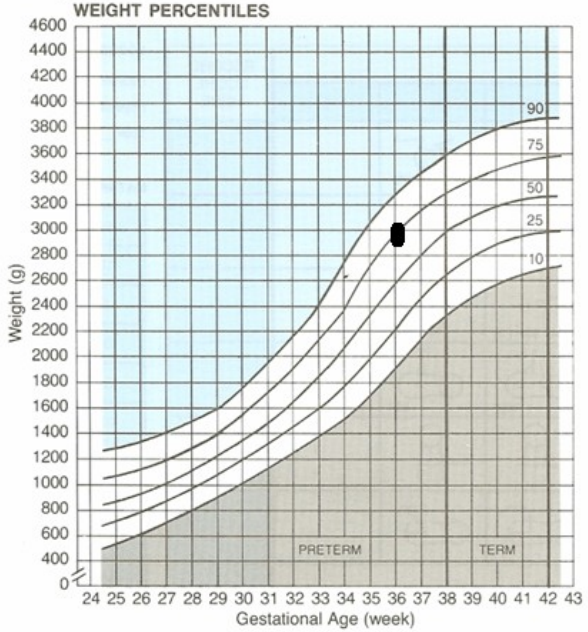
NAME JD | DATE OF EXAM 9/11/19 | LENGTH 48.3 cm

HOSPITAL NO. | SEX Female | HEAD CIRC. 32 cm

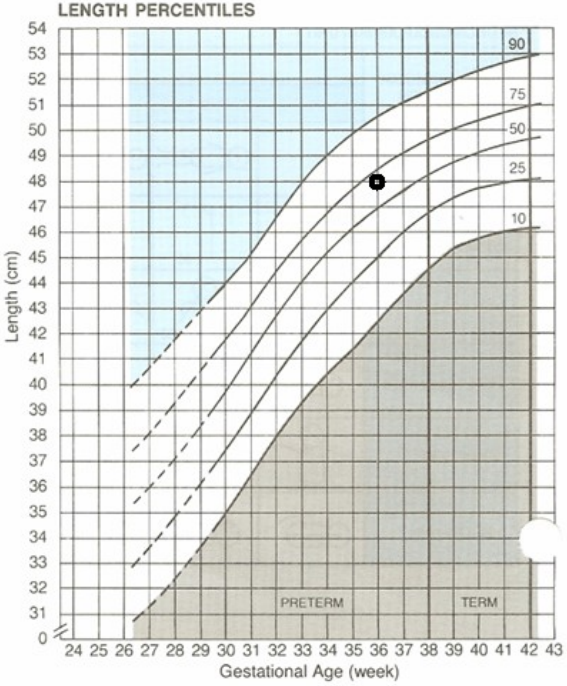
RACE White | BIRTH WEIGHT 3080 grams | GESTATIONAL AGE 36 weeks

DATE OF BIRTH 9/11/19

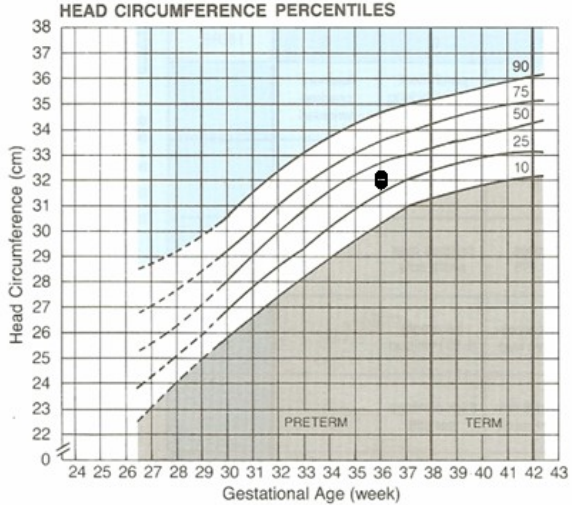
WEIGHT PERCENTILES



LENGTH PERCENTILES



HEAD CIRCUMFERENCE PERCENTILES



CLASSIFICATION OF INFANT*	Weight	Length	Head Circ.
Large for Gestational Age (LGA) (>90th percentile)			
Appropriate for Gestational Age (AGA) (10th to 90th percentile)	☆	☆	☆
Small for Gestational Age (SGA) (<10th percentile)			

*Place an "X" in the appropriate box (LGA, AGA or SGA) for weight, for length and for head circumference.

Hour-Specific Nomogram for Risk Stratification

Infant age	12 hours	
Total bilirubin	5 mg/dl	
Risk zone	Low Intermediate Risk	

Risk zone is one of several risk factors for developing severe hyperbilirubinemia.

Recommended Follow-up

Hyperbili Risk Level	Interval
Lower Risk (>= 38 weeks and well)	If discharge age <72 hours, follow-up according to age and other clinical concerns
Medium Risk (>=38 weeks + hyperbili risk factors OR 35 to 37 6/7 weeks and well)	If discharge age <72 hours, follow-up within 48 hours
Higher Risk (35 to 37 6/7 weeks and hyperbili risk factors)	If discharge age <72 hours, follow-up within 48 hours, consider TcB/TSB at follow-up

AAP Phototherapy Guidelines (2004)

Neurotoxicity Risk Level	Start phototherapy?	Approximate threshold at 12 hours of age
Lower Risk (>= 38 weeks and well)	No	9.1 mg/dl
Medium Risk (>=38 weeks + neurotoxicity risk factors OR 35 to 37 6/7 weeks and well)	No	7.7 mg/dl
Higher Risk (35 to 37 6/7 weeks and neurotoxicity risk factors)	No	6 mg/dl

N305 Care Plan Grading Rubric: Newborn Student Name: Tyler Y ager

Demographics	10 Points	5 Points	0 Points	Points/ Comments
Demographics • Date/time of clinical assessment • Date & time of birth • Patient initials • Age in hours at clinical assessment • Gender • Race/Ethnicity • Weight at birth and at time of assessment • Length at birth • Head circumference at birth • Chest circumference at birth	Includes complete information regarding the patient. Each section is filled out appropriately with correct labeling.	Two or more of the key components are not filled in correctly.	5 or more of the key components are not filled in correctly and therefore no Points were awarded for this section	
Mother/Family Medical History	**15 Points**	**10 Points**	**0 Points**	**Points/ Comments**
Prenatal History of the mother When Prenatal care started Abnormal Prenatal labs/diagnostics Prenatal complications Smoking/Drugs in pregnancy **Labor History of Mother** • Gestation at onset of labor • Length of labor • ROM • Medications in labor • Complications of labor & delivery **Past Surgical History** • All previous surgeries should be listed **Family History**	Includes each section completed correctly with a detailed list of pertinent medical history, surgical history, family history and social history. If patient is unable to give a detailed history, look in the EMR and chart.	1 or more of the key components is missing detailed information.	More than two of the key components are not filled in correctly	

• Pertinent to infant **Social History** • Pertinent to infant • Father of baby involvement **Living situation** **Education level** • If applicable to parents' learning barriers or care of infant				
Birth History	**10 Points**	**5 Points**	**0 Points**	**Points/ Comments**
Birth History • Length of second stage labor • Complications of birth • APGAR scores • Resuscitation methods beyond the *normal needed*	Every key component of the birth history is filled in correctly with information	Two of the key components are missing in the birth history. The birth history is lacking important information to help determine what has happened to the patient.	No birth history included.	
Feedings techniques	**8 Points**	**4 Points**	**0 Points**	**Points/ Comments**
Latch score assessment **Bottle feeding technique assessment** Weight loss calculation	All key components are filled in correctly. The student was able to identify the effectiveness of the feeding technique Calculation of weight loss is accurate	One of the key components is missing or not understood correctly.	Student did not complete this section.	
Intake and Output	8 Points	1-7 Points	0 Points	Points/Comments

Intake • Measured and recorded appropriately—what the patient takes IN— • Includes: Oral intake i.e. frequency and length of breastfeeding sessions or frequency and volume of formula feeding; NG or OG feeding; or IV fluid intake. **Output** • Age in hours of first void and stool provided • Measured and recorded appropriately—what the client puts OUT • Includes: urine, stool, drains/tubes, emesis, etc.	All of the key components of the intake and output were addressed. Student demonstrates an understanding of intake and output.	One of the key components of the intake and output is missing. Difficult to determine if the student has a thorough understanding of the intake and output.	Student did not complete this section	

Laboratory /Diagnostic Data	15 Points	5-14 Points	4-0 Points	Points/ Comments
Normal Values • Should be obtained from the chart when possible as labs vary some. If not possible use laboratory guide. • Normal values should be listed for all laboratory data. **Laboratory Data** • Admission Values • Most recent Values (the day you saw the patient) • Prenatal Values **Rational for abnormal values** • Written in complete sentences with APA citations • Explanation of the laboratory abnormality in this client • For example, elevated WBC in patient with pneumonia is on antibiotics. • Minimum of 1 APA reference, no	All key components have been addressed and the student shows an understanding of the laboratory norms and abnormalities. Student had 1 reference listed and is able to correlate abnormal laboratory findings to the client's particular disease process.	1 or more of the client's labs were not reported completely with normal values or patient results. Lab correlation did not completely demonstrate student's understanding of correlation.	Student did not have an understanding of laboratory values and the abnormalities. More than 2 labs were excluded. Student did not discuss the abnormal findings in APA format with a minimum of 1 reference.	

reference will result in zero Points for this section				

Current Medications	15 Points	1-14 Points	0 Points	Points/ Comments

Current Medications
• Requirements of all inpatient hospital medications given to the newborn
• Each medication must have brand/generic name
• Dosage, frequency, route given, class of drug and the action of the drug
• Reason client taking
• 2 contraindications must be listed
  o Must be pertinent to your patient
• 2 side effects or adverse effects
• 2 nursing considerations
• Key nursing assessment(s)/lab(s) prior to administration
  o Example: Assessing client's HR prior to administering a beta-blocker
  o Example: Reviewing client's PLT count prior to administering a low-molecular weight heparin
• 2 client teaching needs
• Minimum of 1 APA citation, no citation will result in loss of all Points in the section
	All key components were listed for each of the medications, along with the most common side effects, contraindications and client teachings. Student had 1 APA citation listed.	1 point will be lost for each medication with incomplete information.	There was noted lack of effort on the student's part to complete this section or there was no APA citation listed.	

Physical Exam	25 Points	1-29 Points	0 Points	Points/ Comments
• Gestational Age assessment using Ballard scale • Completion of a head to toe	All key components are met including a	One or more of the key components is missing from a	More than half of the key components are	

assessment done on the students own and not copied from the client's chart • Safety risk assessment • **No safety risk assessment will result in a zero for the section**	complete head to toe assessment, safety risk assessment.	given section. Each body system is worth Points as listed on care plan	missing. Therefore, it is presumed that the student does not have a good understanding of the head to toe assessment process.	
Vital Signs	**6 Points**	**3 Points**	**0 Points**	**Points/ Comments**
Vital signs • 3 sets of vital signs are recorded with the appropriate labels attached • Includes a set at birth, 4 hours after birth and at the time of your assessment. • Student highlighted the abnormal vital signs • Student wrote a summary of the vital sign trends	All the key components were met for this section (with 3 sets of vital signs) and student has a good understanding of abnormal vital signs.	Only one set of vital signs were completely recorded and one of the key components were missing	Student did not complete this section	
Pain Assessment	2 Points	1 point	0 Points	**Points/ Comments**
Pain assessment • Pain assessment was addressed and recorded once throughout the care of this client It was recorded appropriately and stated what pain scale was used	All the key components were met (1 pain assessments) for this section and student has a good understanding of the pain assessment.	One assessment is incomplete or not recorded appropriately.	Student did not complete this section	

Summary of Assessment	**4 Points**	**2-0 Points**	**Points/ Comments**
• Discussion of the clinical significance of the assessment findings • Written in a paragraph form with no less than 5 sentences	All the key components of the summary. It is written in a paragraph form, in the student's own words. This is developed in a paragraph format with no less than 5 sentences.		

Nursing Care/Interventions	12 Points	2-0 Points	Points/ Comments
Nursing Interventions • List the nursing interventions utilized with your client • Includes a rationale as to why the intervention is carried out or should be carried out for the client **Teaching topics** • List 2 priority teaching items • Includes 1 expected outcome for each teaching topic	All the key components of the summary of care (2 Points) and discharge summary (2 Points) were addressed. Student demonstrated an understanding of the nursing care.	One or more of the key components of the nursing care was missing, therefore it was difficult to determine if the student had a thorough understanding of the nursing care.	

Nursing Diagnosis	15 Points	5-14 Points	4-0 Points	Points/ Comments
Nursing Diagnosis • List 2 nursing diagnosis o Include full nursing diagnosis with “related to” and “as evidenced by” components • Appropriate nursing diagnosis • Appropriate rationale for each diagnosis o Explain why the nursing diagnosis was chosen • Minimum of 2 interventions for each diagnosis • Rationale for each intervention is required • Correct priority of the nursing diagnosis • Appropriate evaluation	All key components were addressed. The student demonstrated an appropriate understanding of nursing diagnoses, rationales, interventions and listed diagnosis in correct priority.	One or more of the nursing diagnosis/rationale/intervention sections was incomplete or not appropriate to the patient Each section is worth 3 Points. Prioritization was not appropriate.	More than 2 of the nursing diagnosis sections were incomplete or inappropriate. Prioritization is dangerously inappropriate.	

Overall APA format	5 Points	1-4 Points	0 Points	Points/ Comments
APA Format • The student used appropriate APA in text citations and listed all appropriate references in APA format. • Professional writing style and grammar was used in all narrative sections.	APA format was completed and appropriate. Grammar was professional and without errors	APA format was used but not correct. Several grammar errors or overall poor writing style was used. Content was difficult to understand.	No APA format. Grammar or writing style did not demonstrate collegiate level writing.	

		Points
- Instructor Comments:	**Total Points awarded**	
Description of Expectations	**/150= %**	
	Must achieve 116 pt =77%	