

Nyack College
Cheryl Phenicie School of Nursing
Newborn Assessment

Student Name Stephanie Alex Infant's initials A.V. Sex M

Date of care 2/26/20 Date & time of birth 2/25/20 at 01:09 AM

Type of delivery NSVD Complications Right clavicular fracture

Apgar 9 / 9 Blood type O+ Coombs _____

Birth weight & length W: 7 lb 3 oz, L: 20.5 in.

Medications

Medication name	Dose/ Route/Frequency	Use/Action
Erythromycin	5 mg, 1cm, topical eye ointment, once upon admission	Prevent retinopathy.
Hepatitis B vaccine	5 mcg/0.5 mL, IM, once within 24 hours upon admission	Provide immunization to hepatitis B
Phytonadione	1 mg/0.5 mL, IM, once upon admission	Prevent hemorrhagic disease of newborn.

Assessment

Vital Signs Weight Length	T: 97.6 F, HR: 122 bpm, RR: 47 Wt: 6 lb 9oz Length: 20.5 in
Skin <ul style="list-style-type: none"> color, texture, turgor, integrity variations 	<ul style="list-style-type: none"> Skin is superficially peeling, visible veins, and has good turgor. Jaundice upto knees. Birthmark on left LL, proximal to knee.
Head & Neck <ul style="list-style-type: none"> shape fontanelles circumference caput succedaneum cephalhematoma face, nose, eyes, ears 	<ul style="list-style-type: none"> Head molding with caput succedaneum. Fontanelles are soft and flat. HC: 32.5 cm/325 mm. No cephalohematoma. Well curved pinna, soft, & instant recoil. Abundant lanugo.
Chest- Respiratory/ Cardiovascular	<ul style="list-style-type: none"> Lungs were CTA.

<ul style="list-style-type: none"> • breath sounds • S1 S2 • cyanosis/ acrocyanosis • respiratory distress • circumference 	<ul style="list-style-type: none"> • Normal S1 and S2. No extra heart sounds or murmurs. • Chest circumference is 30.5 cm/305 mm. • No cyanosis, acrocyanosis, or signs of respiratory distress.
<p>Abdomen</p> <ul style="list-style-type: none"> • shape • bowel sounds/ BM • umbilical cord • type of nutrition & frequency 	<ul style="list-style-type: none"> • Abdomen is symmetric bilaterally. • Normoactive bowel sounds. • Umbilical cord is dry and unclamped. • Breastfed regularly, every 3-4 hours, and last one was 10 AM today.
<p>Genitalia</p> <ul style="list-style-type: none"> • male- penis, urethral meatus, scrotum, testes • female- labia majora/minora, pseudomenstruation, vaginal tag, discharge • femoral pulses • urine out • anal patency 	<ul style="list-style-type: none"> • Testes descended bilaterally and good rugae. • Penis is circumcised and covered with Vaseline gauze. • Femoral pulse is 2+ and equal bilaterally. • Anal patency seen via bowel movements.
<p>Extremity/Spine</p> <ul style="list-style-type: none"> • posture • movement • extra digits 	<ul style="list-style-type: none"> • Both upper extremities were tightly flexed and had high resistance, especially on the right side. • Crepitus palpated at R. clavicular region. • Mongolian patch on lower back. • No polydactyly.
<p>Reflexes</p> <ul style="list-style-type: none"> • blink • moro • grasp • tonic neck • sneeze • rooting • suck • swallow • gag reflex • stepping • babinski 	<p>All reflexes were positive.</p>
<p>Bonding</p> <ul style="list-style-type: none"> • Describe interaction between mother and infant 	<p>Mother spent time with baby by breastfeeding every 3-4 hours and having skin-to-skin contact. The mother was emotional and overwhelmed but still showed a lot of attention and care to the baby.</p>
<p>Client Education</p> <ul style="list-style-type: none"> • topic and did patient verbalize or demonstrate 	<p>The topic was on postpartum blues. Educated the mother that postpartum blues is temporary and will gradually fade away. Promoted the</p>

understanding or needs reinforcement	importance of adequate sleep, hydration, nutrition, and support system. The mother verbalized understanding.
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Additional Comments:

Maturation Assessment of Gestational Age (New Ballard Score)

Neuromuscular Maturity

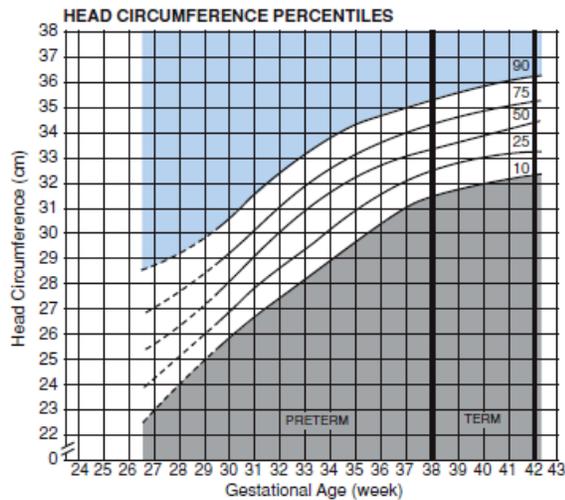
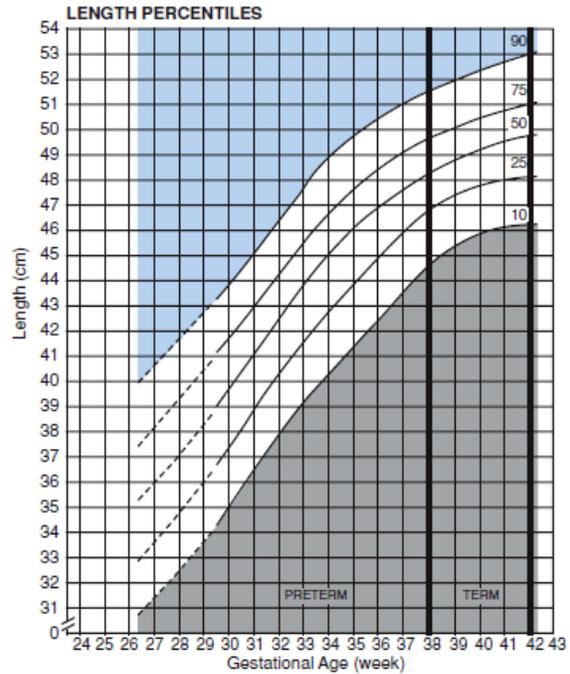
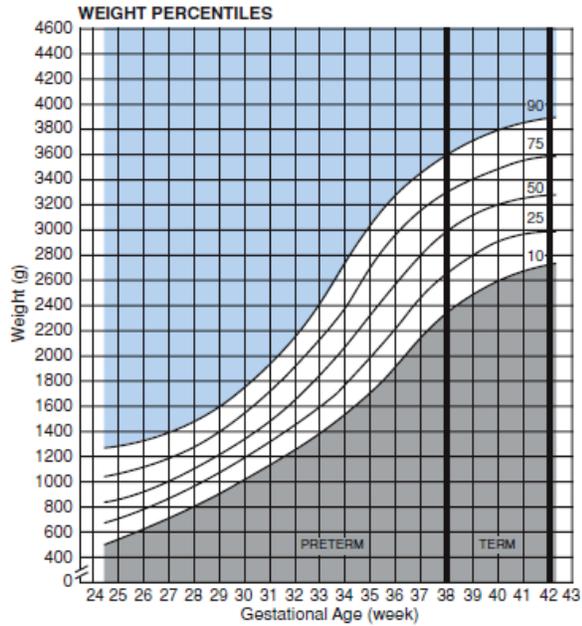
Score	-1	0	1	2	3	4	5
Posture							
Square window (wrist)	> 90°	90°	60°	45°	30°	0°	
Arm recoil		180°	140-180°	110-140°	90-110°	< 90°	
Popliteal angle	180°	160°	140°	120°	100°	90°	< 90°
Scarf sign							
Heel to ear							

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	Maturity Rating
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	-10 20
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	-5 22
							0 24
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	5 26
							10 28
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	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 _____ DATE OF BIRTH _____ LENGTH _____
 HOSPITAL NO. _____ SEX _____ HEAD CIRC. _____
 RACE _____ BIRTH WEIGHT _____ GESTATIONAL AGE _____
 DATE OF BIRTH _____



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.

References
 1. Battaglia FC, Lubchenco LO: A practical classification of newborn infants by weight and gestational age. *J Pediatr* 1967; 71:159-163.
 2. Lubchenco LO, Hansman G, Boyd E: Intrauterine growth in length and head circumference as estimated from live births at gestational ages from 26 to 42 weeks. *Pediatrics* 1966; 37:403-408.
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Postpartum Assessment

Student Name Stephanie Alex Date of care 2/26/20

Patient's initials A. V Age 25 Marital status Single LMP 5/18/19 EDC 2/25/20

Gravida/ Para G6/P1 TPAL 1 0 5 1 Blood Type O+ Allergies N/A

Date, time and type of delivery 2/25/20 at 01:09 via NSVD

Complication N/A EBL 250 mL Anesthesia Epidural

Religion Catholic Educational level High School Occupation N/A

Medications

Medication name	Dose/ Frequency	Use/ Action
MMR	0.5 mL SC, once upon administration	to provide immunity against measles, mumps, and rubella
Docusate Sodium	100 mg PO, twice a day	Stool softener
Ferrous gluconate	324 mg PO, every 12 hours	To treat iron deficiency anemia.
Multivitamin prenatal	1 tablet PO, once a day	To provide variety of minerals and vitamins.
Simethicone	80 mg PO, 3x a day	To relieve abdominal bloating and cramping due to excessive gas.

Assessment

LOC/ orientation Vital Signs, Pain Activity	T: 97.3 F, HR: 55 bpm, RR: 14, BP: 11/64, O2Sat: 100%, and Pain: 2/10. AOx3, laying supine with Hob elevated to 30 degrees, and not in visible distress.
Skin <ul style="list-style-type: none"> • color, texture, turgor, integrity • variations • IV- location, fluid & rate 	<ul style="list-style-type: none"> • Skin smooth, intact, and skin color is consistent with genetic background. Good skin turgor and no discolorations. • Not connected to an IV.

Respiratory/ Cardiovascular/ <ul style="list-style-type: none"> • Lung sounds • S1S2 • lactating or nonlactating • breasts/nipples 	<ul style="list-style-type: none"> • Lungs are CTA. • Normal S1 and S2. No extra heart sounds or murmurs. • Lactating, breastfeed every 3-4 hours. • Breasts are soft and tender. Nipples are intact with no signs of trauma.
Abdomen <ul style="list-style-type: none"> • diet • bowel sounds • surgical incision • fundus • bowel movements 	<ul style="list-style-type: none"> • Bowel sounds are normoactive. • Fundus is firm, midline, and one fingerwidth above the umbilicus. • Last meal was at 9:45 AM, tolerates diet, and consumed 90% of meal. • Last BM was 2/24/20.
Genitalia <ul style="list-style-type: none"> • lochia- amount, color • urine out • episiotomy/ laceration 	<ul style="list-style-type: none"> • Scant rubra lochia. • Periurethral laceration and slight swelling and tenderness on right labia minora. • Voids frequently, no dysuria. • No hemorrhoids.
Extremities <ul style="list-style-type: none"> • varicosities • pedal pulses • homan's sign • edema 	<ul style="list-style-type: none"> • Smooth and intact. No discolorations, edema, or varicosities. • Pedal pulse is 2+ and equal bilaterally. • Negative Homan's sign.
Bonding <ul style="list-style-type: none"> • describe interaction between mother and infant • e motional state 	Mother breastfeeds every 3-4 hours and had skin-to-skin contact with baby. She frequently asks about her baby and if he is okay. Continuously monitors what others are doing to her baby while in her room. Patient was excited as this is her first child but was very emotional and worried about her baby's situation.
Client Education <ul style="list-style-type: none"> • topic and patient verbalize or demonstrate understanding or needs reinforcement 	The topic that the patient was educated on was on postpartum blues. She understood and verbalized that this is temporary and will eventually stabilize. She understood that she needs to get proper sleep, hydration, nutrition, and be able to express her feelings and thoughts.

Additional Comments:
