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On Feb 10, 2023 my colleague and I were on mother-baby dyad care. The mother was 37 years old, Gravida:5 Para:4, all her previous including the one she had were C-section deliveries. She gave birth to a baby girl, weighing at 7lbs,8oz with an APGAR score of 9,9. The mother had her sister in the room to help translate since she only spoke Urdu. I wasn't able to be present in the room during the physical assessment. My assumption was either it was violating her Muslim faith or she didn't feel comfortable having a male assess her private areas. I was understanding and respected her reasons, and I didn't want to impose in any kind of way. So, I waited outside the room while my colleague did the assessment and recorded the results after. We performed the newborn assessment afterwards. Based on the notes, the baby did have one complication and that was a loose nuchal cord, meaning the baby had its umbilical cord wrapped around their neck. The baby did receive her main medications (Erythromycin, Hep B vaccine, and Vitamin K). There was some jaundice on her face and she did have several stork bites on the body and extremities. She was being breastfed and given formula as well. We did go back with our instructor to assess her fundus because it is difficult to locate. At this time she was comfortable with me in the room because our instructor was present. She did elicit some pain when palpating. We also wanted her to lay supine and assess for diastasis recti. The mother was scared to pull herself up because she wasn't sure what to expect. We assured her nothing was wrong and that it was normal to have that finding. Another exciting thing was that our clinical group was able to witness another circumcision, but it was with a different

| pediatricianobstetrician. The only difference with this one was that he was more informative with the procedure and gave us reasons as to why he's performing each step. On a personal level, I feel very eager to learn more in each clinical experience when it comes to newborn care. My greatest accomplishment of the week was being able perform the newborn assessment with ease. This time I didn't take as long as before. I believe our communication skills went well with the mother. I did respect her wishes and made her feel comfortable. One area that I can work on in the next clinical experience is completing the whole newborn assessment without looking at the sheet. I do have the confidence now to perform the task, but I also need to memorize each specific assessment. One biblical verse that I used during my clinical experience was "In everything set them an example by doing what is good. In your teaching show integrity, seriousness" (Titus 2:7). The reason why I chose this scripture is because being a male working in a Maternity Unit, I need to show every bit of respect to the female patients. I believe that it is within a woman's right to refuse care that may be provided by a male. Their body is sacred and needs to be understood and respected fully.