

Dyaa

Alliance University  
Postpartum Assessment

Student Name SD Date of care 2/24/22  
 Patient's initials MM Age 28 Marital status S LMP 1/1 EDC 2/22/23  
 Gravida/ Para 3/2 TPAL 3003 Blood Type O+ Allergies NKA  
 Date, time and type of delivery 2/22/23 10:23 am Induction/ Augmentation Dinoprostone  
 ↳ MW late term preg  
 Complication None EBL 200mL Anesthesia none  
 Religion N/A Educational level N/A Occupation Fulltime

Medications

Medication name	Dose/ Frequency	Use/ Action
Ferrous Sulfate 325mg	→ 325mg	<del>Prevents</del> Prevents iron deficiency
Prenatal vitamins	Vitamin	Vitamins for pregnancy
docusate capsule	100mg	Treats constipation

Assessment

Vital Signs: Temp 98.2F Pulse 64 Resp 20 BP 123/60 O<sub>2</sub> 100%  
 sat \_\_\_\_\_  
 LOC/ orientation AxOx4 Activity walking without any help  
 Pain (scale, location, etc) no pain

Skin

Color Pink skin color texture regular turgor:  good  poor  
 integrity intact variations \_\_\_\_\_  
 IV- location, fluid & rate No IV

Chest- Respiratory/ Cardiovascular

Breath sounds No adventitious sounds Heart sounds:  S<sub>1</sub> S<sub>2</sub>  murmurs: none  
 Other \_\_\_\_\_  
 lactating  nonlactating  
 Breasts:  soft  filling in  firm  engorged  
 Nipples:  erect  flat  inverted  
 intact  impaired:  sore  red  blistered  cracked  bleeding

Notes

**GI/Abdomen**

Diet Normal diet BS: normoactive  hypoactive  absent  
 Diastasis recti: absent  present Hemorrhoids none  
 Incision:  None  
 Type:  transverse  vertical  umbilical  
 Closure:  staples  sutures  steri-strips  
 Condition:  approximated  redness  swelling  discharge  other \_\_\_\_\_  
 Dressing: \_\_\_\_\_  
 fundal assessment:  firm  boggy  firm with massage  
midline  displaced:  right  left  
 Fingerwidths/ fingerbreaths: Fundus firm midline at umbilicus

**Genitalia**

Perineum:  intact  episiotomy  laceration/ repaired:  1°  2°  3°  4°  
 Extension \_\_\_\_\_  
 Condition:  approximated  redness  swelling  discharge  other \_\_\_\_\_  
 Lochia: color serosa amount Scant odor \_\_\_\_\_  
 Note: Perineum tear sutured with chromic 3-0 suture.

**Extremities**

Varicosities normal pedal pulses 2+ homan's sign Negative  
 Edema:  none  non-pitting  pitting:  1+  2+  3+  4+  
 thrombophlebitis

**Elimination**

Voiding pattern:  normal  incontinence  distended  catheter type: \_\_\_\_\_  
 Last BM last night at 7pm  constipation  diarrhea  hemorrhoid

**Psychological**

Stage:  taking in  taking hold  letting go  
 postpartum blues  history of depression  history of psychiatric diagnosis  
 Edinberg depression scale score \_\_\_\_\_

**Bonding**

Describe interaction between mother and infant  
Mother was interacting with infant really well, she was present with her significant other.  
She was concerned that she could not produce enough breast milk so I showed her some techniques.

**Client Education**

Topic	Patient verbalize or demonstrate understanding or needs reinforcement	Additional information
Latching technique and positions	Pt demonstrated how to properly position the baby on her breast.	Pt also had a nipple shield to help her nipple produce more breast milk.

**Additional Comments:**

Patient had a smaller nipple than her right nipple made it harder for baby to latch on properly.  
Baby also had tongue tied which made it harder also. 11 We also gave her nipple cream.

Dyad

Alliance University  
Newborn Assessment

Student Name SD Date of care 2/24/22 Infant initial MM Gender Boy  
Date & time of birth 2/22/23 Type of delivery Vaginal delivery  
10:23am  
Complications/ resuscitation measures none  
Apgar 9/9 Blood type O+ Coombs Neg TCB/bili levels 7.1 TCB  
Newborn screening:  yes  no Hearing screen:  yes  no results: Passed

Medications

Medication name	Dose/ Route/Frequency	Use/Action
Erythromycin	topically (each eye)	Gonorrhea
Hepatitis B vac	injection	Immunity
Vitamin K.		Clotting factors

Assessment

Vital Signs: Temp 98.5F Pulse \_\_\_\_\_ Resp 84 BP \_\_\_\_\_ O<sub>2</sub> 100%  
sat \_\_\_\_\_ 33.6 gm 7.7 lbs HR: 128 bpm.  
Weight 7.7 lbs Birth weight 5.0 lbs % change \_\_\_\_\_  
Length 50 cm Head 33.5 HC Chest 35

Skin

Turgor:  good  poor Condition:  smooth  dry, cracked  peeling Rough  
Color:  pink  ruddy  pale  cyanotic  acrocyanosis  
 jaundice: Location Stomach/legs Type physiological  
TCB 7.1  
Variations: (rashes, lesions, birthmarks etc) \_\_\_\_\_

Head & Neck

Shape:  normocephalic  other: Small caput.  
Fontanelles: Anterior:  flat  bulging  sunken/depressed  
Posterior:  flat  bulging  sunken/depressed  
Sutures:  open  closed  overriding

Variation:  molding  caput succedaneum  cephalhematoma

Facial:  symmetrical  non-symmetrical: \_\_\_\_\_

Eyes (symmetry, conjunctiva, sclera, eyelids, PERL):  normal  abnormal

Ears (shape, position, auditory, auditory response):  normal  abnormal

Nose (patency):  normal  abnormal milky

Mouth (lip, mucous membranes, tongue, palate):  normal  abnormal → tongue tied

Neck (ROM, symmetry):  normal  abnormal

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**Chest- Respiratory/ Cardiovascular**

Appearance (shape, breasts, nipples): intact

Breath sounds:  clear  adventitious

Heart sounds:  S<sub>1</sub> S<sub>2</sub>  murmurs: \_\_\_\_\_

S/S of respiratory distress  yes: \_\_\_\_\_  no

Clavicles:  normal  abnormal

Brachial/femoral pulse (compare strength, equality):  normal  abnormal

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**Abdomen**

Appearance (shape, size):  normal  abnormal

Umbilical cord condition: crusting

Bowel sounds: BS:  normoactive  hypoactive  absent

Date/Time of Last BM: 9:30 am and 11:30 am How many BM in last 24hrs: 2 within 4 hrs.

Describe BM during shift mustard yellow color

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**Genitalia**

Male (circumcision, urethral meatus, scrotum, testes): Normal

Female (labia majora/minora, pseudomenstruation, vaginal tag, discharge): \_\_\_\_\_

Circumcision:  yes  no

Femoral pulses:  normal  abnormal

Urine output:  Number of output in last 24hrs: \_\_\_\_\_

Anal patency:  normal  abnormal \_\_\_\_\_

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**Musculoskeletal**

Posture:  upper and lower flexed  partially flexed  extended

ROM all extremities:  normal  abnormal

extra digits: none

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**Neurological Reflexes**  
(normal: positive, symmetrical)  
(abnormal: absent, weak, assymetrical)

Blink:  normal  abnormal

Moro:  normal  abnormal

Grasp:  normal  abnormal

Tonic neck:  normal  abnormal  
 Sneeze:  normal  abnormal  
 Rooting:  normal  abnormal  
 Suck:  normal  abnormal  
 Swallow:  normal  abnormal  
 Gag reflex:  normal  abnormal  
 Stepping:  normal  abnormal  
 Babinski:  normal  abnormal → Slow babinski reflex on (L) foot.  
 Notes \_\_\_\_\_

**Behavior (Sleep/Activity Pattern 24hrs)**  
 Sleep/wake patterns:  normal  abnormal  
 Consolability:  normal  abnormal

**Nutrition**  
 Breast Milk: frequency every 2 hrs Positioning:  correct  incorrect Latch:  correct  
 incorrect Audible swallow:  yes  no Expressed breast milk in bottle:  yes  no  
 Notes: \_\_\_\_\_

Formula:  
 Type: \_\_\_\_\_  
 frequency: \_\_\_\_\_  
 Amount: \_\_\_\_\_ oz

Satiation:  yes  no  
 Regurgitation:  yes  no  
 Pacifier use:  yes  no

Stool (number per day, color, consistency) Mustard Yellow Consistency 2x/4hrs.  
 Urine output (number per day/ color) Black Spots.  
1st urine urine output at 9:46 a.m.

**Bonding**  
 Describe interaction between mother and infant  
Mother was interacting well with infant.  
mainly concerned on baby breast milk intake, because  
mom had trouble breast feeding at the beginning, after  
some education techniques

Client Education Topic	Patient verbalize or demonstrate understanding or needs reinforcement	Additional information
Importance of frequent breastfeeding	Patient demonstrated understanding	Pt showed me 2 latching techniques.
Latching technique		

APGAR 9.9

**Maturational Assessment of Gestational Age**  
(New Ballard Score)

**Neuromuscular Maturity**

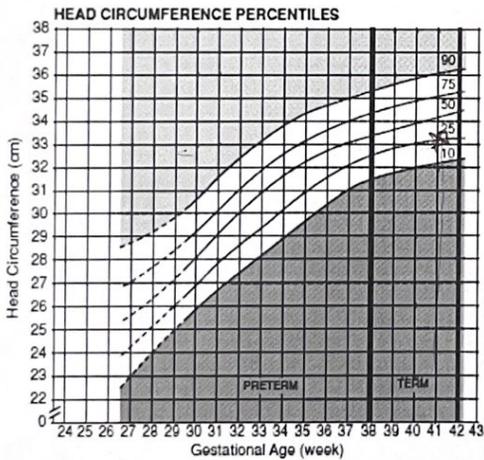
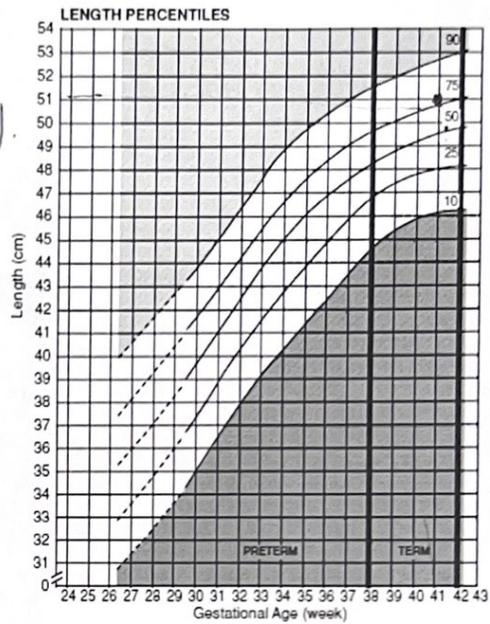
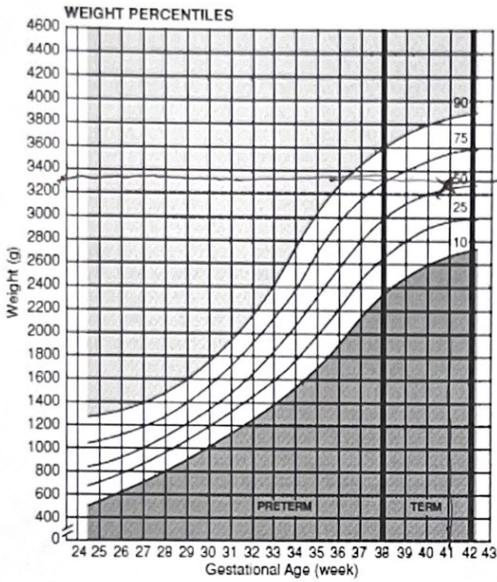
Score	-1	0	1	2	3	4	5
Posture							
Square window (wrist)	> 90°	90°	60°	45°	30°	0°	
Arm recoil		180°	140-180°	110-140°	90-110°	< 90°	
Popliteal angle	180°	160°	140°	120°	100°	90°	< 90°
Scarf sign							
Heel to ear							

**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	<b>Maturity Rating</b>
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	0 24
							15 30
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	25 34
							30 36
							35 38
							40 40
							45 42
							50 44

**CLASSIFICATION OF NEWBORNS (BOTH SEXES)  
BY INTRAUTERINE GROWTH AND GESTATIONAL AGE<sup>1,2</sup>**

NAME MM DATE OF BIRTH 2/22/23 LENGTH 51cm  
 HOSPITAL NO. \_\_\_\_\_ SEX M HEAD CIRC. 33cm  
 RACE Spanish BIRTH WEIGHT 7.7lbs GESTATIONAL AGE 41wks  
 DATE OF BIRTH 2/22/23



CLASSIFICATION OF INFANT*	Weight	Length	Head Circ.
Large for Gestational Age (LGA) (>90th percentile)			
Appropriate for Gestational Age (AGA) (10th to 90th percentile)	X	X	X
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 C, 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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