

Capital Area School of Practical Nursing
Mother-Baby Nursing
Fourth Quarter
October, 2008
Clinical Syllabus

Fourth quarter Mother-Baby clinical consists of each student having a 3 day rotation on LDRP for a total of 21 hours. The instructor student ratio is 1:10 or less. Current enrollment for class #100 is 51.

Clinical Objective: Utilize critical thinking in applying the nursing process when caring for a patient during Labor, Delivery and the Recovery period.

- A. Assess **phases of first stage** of labor(early or latent, active, transition)
 - 1. Dilatation
 - 2. Effacement
 - 3. Station
 - 4. Uterine contractions
 - 5. Fetal tracing pattern, considering external or internal monitoring, reassuring or non-reassuring and nursing actions taken
 - 6. Vital signs and significance
 - 7. Pain control mechanisms utilized
 - 8. Risk/complication factors

- B. Identify appropriate **Nursing Diagnoses** for the **labor** patient
 - 1. Deficient Knowledge
 - 2. Pain
 - 3. Fear
 - 4. Risk for infection
 - 5. Others

- C. Review common intrapartum medications
 - 1. Pitocin
 - 2. Cervidil
 - 3. Stadol
 - 4. Reglan
 - 5. Penicillin
 - 6. Betamethasone
 - 7. Bicitra

D. Review prenatal labs and any additional labor labs and significance

1. Blood type and Rh
2. Hb and Hct
3. GGBS
4. Rubella
5. Hepatitis
6. HIV

E. **Delivery**

1. Monitoring FHR tracing and vital signs during **second** and **third** stages of labor, including significance
2. Evaluate effectiveness of pushing and factors influencing analgesia, etc.
3. Episiotomy or laceration (**first, second, third, or fourth degree**)
4. Complications of delivery

F. Medications after delivery

1. Pitocin
2. Methergine
3. Hemabate

G. **Maternal Recovery**

1. Assessment and significance
 - a. Uterine fundus
 - b. Lochia
 - c. Bladder
 - d. Bowel
 - e. Perineum (episiotomy or lateration), etc.
 - f. Vital signs
 - g. Pain
 - h. Bonding
 - i. Breastfeeding
2. Identify appropriate **Nursing Diagnoses** for the **Recovery** period
 - a. Pain
 - b. Urinary retention
 - c. Others

Clinical Objective: Utilize critical thinking in applying the nursing process during the Postpartum period.

A. Assess maternal physiological changes for postpartum period. **Complete Postpartum Physical Assessment Form.**

1. Breasts
2. Uterus
3. Bladder
4. Bowels
5. Lochia (rubra, serosa, alba)
6. Perineum (episiotomy, laceration, etc.)
7. Abdominal incision (Cesarean birth)
8. Holman sign
9. Emotional/Bonding

B. Identify appropriate Nursing Diagnoses for the **Postpartum** patient

1. Deficient Knowledge
2. Pain
3. Risk for infection
4. Effective/Ineffective breastfeeding
5. Others

Clinical Objective: Utilize critical thinking in applying the nursing process when caring for the antenatal patient.

A. Preterm labor

- a. Assessment
- b. Medications
 - i. Magnesium Sulfate
 - ii. Terbutaline
 - iii. Betamethasone
- c. Identify appropriate **Nursing Diagnoses**
- d. Laboratory tests

B. Gestational Hypertension (Pregnancy Induced Hypertension/PIH)

- a. Assessment
- b. Medications
 - i. Magnesium Sulfate
- c. Identify appropriate **Nursing Diagnoses**
- d. Laboratory tests

Clinical Objective: Utilize critical thinking in applying the nursing process when caring for newborns.

- A. Identify components of initial assessment and care
 - 1. APGAR
 - a. Heart rate
 - b. Respiratory effort
 - c. Muscle tone
 - d. Reflex irritability
 - e. Color
 - 2. Medications
 - a. Vitamin K (Aquamephyton)
 - b. Erythromycin for eyes
 - c. Triple dye for cord
 - 3. Identify care of **newborn**
 - a. Airway
 - b. Thermoregulation
 - c. Identification
- B. Identify components of newborn assessment. **Complete Newborn Assessment Form.**
 - a. Vital sign/thermoregulation
 - b. Voids
 - c. Stools
 - d. Physical assessment
 - e. Reflexes
 - f. Cord care
 - g. Circumcision care
- C. Identify appropriate Nursing Diagnoses for the **Newborn**
 - a. Risk for impaired gas exchange
 - b. Risk for alteration in body temperature
 - c. Risk for infection
 - d. Others
- D. Review common **Newborn** medications
 - a. Sweet Ease
 - b. Hepatitis B vaccine

- E. Identify neonatal complications with treatment and nursing interventions.
 - a. Hyperbilirubinemia
 - b. Hypothermia
 - c. Hypoglycemia
 - d. Sepsis

**General Guidelines for Mother-Baby/
Labor & Delivery Rotation**

1. Wear street clothing. Wear or carry nursing shoes/socks. You will change into scrubs.
2. Only wedding band for jewelry and watch. Keep watch in pocket when caring for newborns
3. **EAT** before coming to clinical
4. Do not bring valuables to clinical unit
5. Notify appropriate unit/instructor of absence
 - a. Memorial Medical Center Family Maternity Suites 788-3280
 - b. St. Johns Hospital The Birth Center 544-6464-30300
6. All other CASPN Student Handbook policies apply.

Textbook:

1. Leifer, G., INTRODUCTION TO MATERNITY & PEDIATRIC NURSING, Saunders, 5th edition, 2007.

Reference:

1. ATI, Maternal Newborn Nursing PN Edition 7.1, Assessment Technologies Institute, 2008.

Revised October, 2008

