Chapter 4: Breast self-exam pp. 112-113

Chapter 9: Diminished stress and improving pregnancy outcomes pp. 249-278

# **CARE OF THE NEW FAMILY**

Readings:

WARD:

Chapter 5: pp 132-143

Chapter 9: pp. 251-287

Chapter 11: Substance Abuse pp. 390-391

Chapter 16: Caring for the Woman Experiencing Complications During the Postpartal Period

\*The understanding of key prenatal and labor and delivery concepts is necessary in order to facilitate postpartum family care.

- 1. Baseline Data
  - a. Definitions of terms
    - i. Antepartum
    - ii. Intrapartum
    - iii. Postpartum
    - iv. Gravida
    - v. Parity
    - vi. Gestation
    - vii. Term
  - b. Anatomy and physiology (overview)
    - i. Internal and external reproductive organs
      - 1. breasts and nipples
      - 2. uterus
      - 3. perineum
      - 4. rectum
- 2. Nursing Process
  - a. Assessment data
  - i. Client history/profile
    - 1. Maslow hierarchy of needs
      - a. Risk assessment
      - b. Physical assessment
      - c. Pertinent prenatal lab tests and data
      - d. Determination of length of gestation
      - e. Labor data
      - f. Method of delivery
      - g. Analgesia/Anesthesia
  - b. Data Analysis: Common Nursing Diagnoses

Commented [i1]: Delete this line

Commented [i2]: Add these to readings

- i. Actual
- ii. Risk
- iii. Wellness
- c. Expected outcome statement for family
- d. Interventions with rationales
  - i. Evidence-based standards
- e. Evaluation

Commented [i3]: Move this to the right after readings list

#### **CARE OF THE NEW FAMILY**

#### CARING FOR THE POSTPARTAL WOMAN AND HER FAMILY

#### Readings:

#### WARD:

Chapter 12: Episiotomy Section pp. 455-456

Chapter 13: Nerve block analgesia and anesthesia pp. 490-499

Chapter 15: Postpartum Care pp. 553-575, 587-599

Refer to appropriate drug classifications relative to this area.

# OUTLINE FOR INTRODUCTION TO CARE OF THE NEW FAMILY

- 1. Baseline Data
  - a. Current issues in maternal-newborn care
  - b. Statistics related to families/mortality and morbidity
  - c. Social and cultural issues
- 2. Nursing process
  - d. Assessment: data collection needs assessment associated with the following:
    - i. Social, cultural and religious influence on the child
    - ii. Family structure
    - iii. Major trends in growth and development
    - iv. Communication with children
    - v. Overview of current perspectives in maternal-newborn nursing
      - 1. Nursing roles and standards of care
      - 2. Legal and ethical aspects
      - 3. Biomedical technology
- 3. Data Analysis:
  - e. Ineffective coping r/t role change
  - f. Altered family processes r/t birth of newborn
  - g. Altered role performance r/t change in role
- 4. Expected Outcomes
- 5. Nursing Interventions and Rationales

#### Evaluation

# <u>OUTLINE</u>

- 1. Baseline Data
  - a. Physiology (review)
  - b. Psychosocial and Cultural Factors
  - c. Terminology

#### d. Risk Factors

- 2. Nursing Process
  - a. Assessment: Data Collection
    - i. Diagnostic Tests
    - ii. Laboratory Data
    - iii. Needs assessment of a postpartum client
      - i. Physiological Needs
        - a. Oxygen
        - b. Fluids and electrolytes
        - c. Nutrition
        - d. Elimination
        - e. Activity and exercise
        - f. Comfort
        - g. Vaginal vs. Cesarean Delivery
      - ii. Safety and Security Needs
      - a. Discharge teaching self-care, danger signs
      - b. Discharge teaching parenting
        - iii. Love and Belonging needs
    - i. Parent-infant bonding
    - ii. Resumption of sexual activities/contraception
    - iii. Role integration
    - iv. Self -Esteem needs
      - i. Family Wellness
      - ii. Postpartum 'blues'
  - b. Data Analysis: Common Nursing Diagnoses
    - Self-care deficit r/t knowledge deficit secondary to normal psychological changes in postpartum period
    - ii. Altered comfort r/t episiotomy, sore nipples, breast engorgement, hemorrhoids
    - iii. Anxiety r/t changes in role function
  - c. Expected Outcomes
  - d. Nursing Interventions/Rationales
  - e. Evaluation

#### Week 2

# **CARE OF THE NEW FAMILY**

PHYSIOLOGICAL TRANSITION AND NEEDS OF THE NORMAL NEWBORN

#### Readings:

#### WARD:

Chapter 12: Immediate care of the newborn pp. 463-466

Chapter 15: Newborn nutrition pp. 575-591

Chapter 17: Physiological Transition of the Newborn

Chapter 18: Caring for the Newborn

Chapter 20: Newborn/Infant growth and development pp. 770-773 Box 20-5

Refer to appropriate drug classifications relative to this area.

# **Outline**

- 3. Baseline Data
  - a. Normal growth and development
    - i. Biologic
    - ii. Psychosocial
    - iii. Cognitive
  - b. Physiological response to birth
  - c. Psychosocial and cultural factors
  - d. Terminology
- 4. Nursing Process
  - e. Assessment: data collection
    - i. Diagnostic tests
    - ii. Laboratory data
  - f. Needs assessment of the normal newborn:
    - i. APGAR Score
    - ii. Gestational age assessment
    - iii. Physiological adaptations
      - 1. Vitamin K
      - 2. Eye Care
      - 3. Cord Care
      - 4. Physiologic jaundice
    - iv. Neurological status
    - v. Behavioral pattern
    - vi. Oxygenation
    - vii. Temperature control
    - viii. Sleep
    - ix. Nutrition
    - x. Prevention of infection
    - xi. Newborn screening (Metabolic Profile)
    - xii. Allergic response
      - 1. Diaper rash
      - 2. Cradle cap
    - xiii. Parent Education
      - 1. Handling
      - 2. Bathing
      - 3. Wrapping
      - 4. Dressing
      - 5. Feeding (breast and bottle)
      - 6. Elimination
      - 7. Circumcision
      - 8. Safety
      - 9. Vaccinations
      - 10. When to call pediatrician
      - 11. Cord care
    - xiv. Maternal-infant interaction and bonding
  - 2. Data analysis: Common Nursing Diagnoses

- a. Ineffective airway clearance r/t mucus obstruction
- b. Ineffective thermoregulation r/t hypothermia secondary to inadequate subcutaneous tissue
- c. Risk for alteration in tissue perfusion r/t decreased body temperature
- d. Ineffective feeding pattern r/t poor sucking reflex
- e. Ineffective family coping r/t birth of potentially ill newborn

# Week 3 <u>CARE OF THE NEW FAMILY</u> NEEDS OF THE NEWBORN AT RISK

Readings:

## WARD:

Chapter 10: pp. 306-307 (folic acid/cleft lip/palate)

Chapter 18: pp. 680, 681 (cleft lip/palate)

Chapter 19: Caring for the Newborn at Risk

Chapter 23: pp. 878-881 Tracheoesophageal fistula through Family teaching guidelines

Chapter 25: HIV in the Neonate: pp. 974-979

Chapter 26: Congenital Heart Disease pp. 1022-1029

Chapter 35: Evidence-Based Practice pp. 1411; Table 35-1 p. 1419; figures 35-2a & b p. 1419; Nursing

Insight: Nursing role during intubation figure 35-3, p. 1420 Refer to appropriate drug classifications relative to this area.

#### **OUTLINE**

- 1. Baseline Data
  - a. Physiology (review)
  - b. Psychosocial and Cultural Factors
  - c. Terminology
  - d. Risk Factors
- 2. Nursing Process
  - a. Assessment: Data Collection
    - i. Diagnostic tests
    - ii. Laboratory Data
    - iii. Needs assessment of the high-risk newborn
      - 1. Abnormal gestational age or size
      - 2. Nutrition
      - 3. Infant of a diabetic mother
      - 4. Respiratory distress syndrome, retinopathy of prematurity (ROP)
      - 5. Cold stress
      - 6. Hypoglycemia
      - 7. Hypocalcemia
      - 8. Jaundice/kernicterus/hemolytic dysfunction/RH sensitivity
      - 9. Sudden Infant Death Syndrome
      - 10. Neonatal Infections
        - a. Sepsis

## b. TORCH infections

- 11. Necrotizing enterocolitis
- 12. Bronchopulmonary dysplasia
- 13. Tracheoeosophageal fistula
- 14. Cleft lip/palate
- 15. Newborn resuscitation
- 16. Cardiac defects (more in week 12)
- 17. HIV in infants
- 18. Chemical dependence
- b. Data Analysis: Common Nursing Diagnoses
  - i. Impaired gas exchange r/t respiratory distress secondary to surfactant deficiency
  - ii. Risk for alteration in nutrition, less than body requirements r/t limited intake
  - iii. High risk for injury to CNS involvement r/t electrolyte imbalance
- c. Expected Outcomes
- d. Nursing Interventions and Rationales
- e. Evaluation

#### Week 4

## THE PRENATAL JOURNEY

REPRODUCTIVE AND HUMAN SEXUALITY, PHYSIOLOGICAL & PSYCHOSOCIAL CHANGES DURING PREGNANCY, THE PRENATAL ASSESSMENT & PROMOTING A HEALTHY PREGNANCY

Readings:

#### WARD:

Chapter 5: Reproduction

Chapter 7: Conception and Development Chapter 8: Changes during pregnancy

Chapter 9: The Adolescent pp. 278-287 Chapter 10: Promoting a health pregnancy pp. 293-323

Chapter 11: Caring for the Woman Experiencing Complications During Pregnancy

Chapter 14: Oligohydramnios and Hydramnios p. 526

Website: http://www.aidsinfo.nih.gov

Refer to appropriate drug classifications relative to this area.

#### **OUTLINE**

- 1. Baseline Data
  - a. Physiology
  - b. Psychosocial and Cultural Factors
  - c. Terminology
- 2. Nursing Process
  - a. Assessment: Data Collection
    - i. Needs assessment of the Antepartum client
    - ii. Common discomforts of pregnancy
    - iii. Self-care needs during pregnancy

- 1. Breast care
- 2. Clothing
- 3. Bathing
- 4. Travel
- 5. Exercise
- 6. Sexual activity
- 7. Exposure to teratogenic substances
- 3. Needs assessment of the client with Antepartum complications:
  - a. Common causes of bleeding during pregnancy
    - i. First trimester
      - 1. Abortion
      - 2. Ectopic pregnancy
  - b. Second trimester
    - i. Hydatidiform mole
    - ii. Incompetent cervix
  - c. Third trimester
    - i. Placenta previa
    - ii. Abruption of placenta
  - d. Diabetes mellitus
  - e. Hyperemesis gravidarum
  - f. Chronic hypertension
  - g. Pre-eclampsia and eclampsia/DIC
  - h. HELLP Syndrome
  - i. Hydramnios
  - j. Screening and diagnostic tests for fetal well being
  - k. Rh alloimmunization
  - l. HIV
  - m. Chemical dependence
- 4. Data analysis: Common Nursing Diagnoses
  - a. Alteration in comfort r/t growing uterus
  - b. Knowledge deficit r/t use of medications during pregnancy
  - c. Noncompliance r/t lack of understanding of importance of prenatal care
  - d. Self-concept, disturbance in body image r/t pregnancy
  - e. Altered tissue perfusion: peripheral r/t impaired venous circulation to extremities, imbalance between oxygen supply and demand to fetus, secondary to decreased cardiac output
  - f. Knowledge deficit r/t limited exposure to information: insulin dosage and administration
  - g. Risk for ineffective coping r/t unknown outcome of pregnancy
- 5. Expected Outcomes
- 6. Nursing Interventions and Rationales
- 7. Evaluation