

Room 36 ___ Name: _____ Age: _____ S.O _____ Boy/Girl/Surprise

Weeks: _____ G: _____ P _____ GBS +/- _____ ABX _____ Flu: _____ TDaP: _____

MD/Midwife: _____ Peds: _____ Allergies: _____ Hx: _____

Labs: _____ Hep B Y/N _____ Breast/Bottle _____ Circ: Y/N

SROM/AROM: Time: _____ Fluid: _____ Induction: Agent _____ Time _____

Epidural: _____ Foley: _____ Oxytocin _____

Labor onset: _____ Active Labor _____ Complete: _____ Pushing: _____

Delivery time: _____ Placenta: _____ Complications: _____ Epis/Lac: _____

Have available: Oxytocin, cytotec, lidocaine, bands/transmitters. **Double check Cord Blood Label before sending to lab**

AFTER DELIVERY:

Mom BP, pulse and PP checks q 15 min x 8 Fluid and bladder assessment, Temp x1	Baby VS q 30 x 4 or until stable (Temp, HR, RR, Tone, Color)
1.	1.
2.	2.
3.	3.
4.	4.
5.	Vit K @ _____ Erythromycin @ _____
6.	First Feeding @ _____ Bottle/Breast
7.	Bath @ _____
8.	APGARS _____ / _____
Ibuprofen @ _____	Weight: _____ Length _____ Head: _____ Chest: _____

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| <ol style="list-style-type: none"> 1. Call PAC (55671) <ol style="list-style-type: none"> a. Time of delivery to admit infant b. When transferring to PP 2. Call NA (55674) <ol style="list-style-type: none"> a. To take care of delivery cart |
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Mother Chart

Baby Chart

<ul style="list-style-type: none"> o Complete Nurse Charting Section of Delivery Navigator <ul style="list-style-type: none"> ▪ Verify Allergies ▪ Complete Data ▪ QBL ▪ Multiples if applicable ▪ Update OB history ▪ Update OB/GYN status and hit review o Placenta disposition addressed o Complete Labor Flowsheet and Delivery Note o Release signed and held PP orders and clean up Kardex o Complete education and add PP education o Resolve care plans and add PP care plan o Put strip in envelope and give to PAC o Complete Charge Sheet and give to PAC o Pull epidural/ remove bag/ waste in Omnicell/place in black bin o Have pt attempt to void before transfer (up with 2 staff) o Write transfer note 	<ul style="list-style-type: none"> o Complete Newborn Delivery Navigator o Add Newborn Order set (# 30422) <ul style="list-style-type: none"> ▪ Scan and send cord blood ▪ Order/Scan/Send cord gases if indicated ▪ Select appropriate Hep B status ▪ Add GBS order set if indicated ▪ Release cord blood labs if mom's Rh negative o Write Delivery Note o Security Bands checked by 2 RNs o Transmitter on and active before transfer, # _____ o Complete Newborn Flowsheet <ul style="list-style-type: none"> ▪ Weight added in flowsheet o Add Newborn Care Plan and Education o Write transfer note
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Labor to Postpartum Transfer Communication Points

Mother

Baby

<ul style="list-style-type: none"> o Briefly tell patient's L&D story o Interpreter if indicated o Blood type and labs o GBS hours of treatment and ABX used o Lacerations and repairs o QBL o ROM if prolonged or meconium o Review PP risk factors and meds o Significant maternal meds o Discuss if PP tubal is requested o Bladder assessment o U-tox if indicated or sent o Vaccine status of patient o Mutual fundal exam 	<ul style="list-style-type: none"> o Gestational Age o APGARs o Weight- SGA/AGA/LGA o Newborn abnormalities and if Peds was notified o Indicate if NNP was needed for delivery and why o Vitamin K and Erythromycin administered/desired o Hepatitis B desired or declined o Circumcision desired or declined o First feeding and if feeding diary was started o Void or stool o Bath given, desired, declined o Any protocols initiated and why o BG checks- times and results o Cord blood labs released for Rh positive mother o Folder given, reviewed, located o Mutual Check: ID tag/transmitter/crib card
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