Asgnmt

Health & Medicine, Nursing



The video provides an understanding of the various postpartum nursing assessments that need to be carried out in case of vaginal and cesarean deliveries in order to ensure that the mother is recovering well from the delivery and is not at risk of any postpartum hemorrhage. Uterine muscle fibers need to contract following labor failing which it increases the risk of early postpartum hemorrhage for the mother. Postpartum Hemorrhage can occur due to arterial bleeding in the absence of uterine contractions, birth canal injuries, increased distension of the uterus, increased amniotic fluid, prolonged or rapid labor, medical instruments which cause trauma during delivery and placental problems such as placenta previa can lead to postpartum hemorrhage. In order to ensure the safety of the mother a thorough assessment is done by the nursing staff after labor. During the postpartum assessment nurses need to include any history of postpartum hemorrhage along with the present condition of the mother. The video clearly explains the various assessments and interventions that are required to be done. The video gives a clear explanation of the procedures for carrying out various preliminary investigations postpartum such as palpitation of the uterine fundus and determining the firmness of the uterus. Massage is given in case the uterus does not appear to be firm. In case of a full bladder the mother should be encouraged to void. The video also explains how to determine the amount and color of lochia and that increased bleeding could be indicative of risk of hemorrhage. Medication is administered in case of a prolonged uncontracted uterus by injecting into the IV fluid followed by constant monitoring. The labia and perineum are examined for pain. In addition the episiotomy and presence of hemorrhoids

are also examined. The mother is taught about the various methods by which pain can be reduced using ice and analgesics or narcotics. Sprays are used to decrease topical discomfort and tucks can help decrease pain due to hemorrhoids. Immediate assessments also include recording of vital signs such as temperature and blood pressure, skin temperature and color and mucus membrane are also assessed. In case of a C-section, the mother is additionally examined for the level of consciousness in case of general anesthesia and for epidural anesthesia the feeling and movement of extremities are assessed. The respirations, oxygen saturation are also monitored in case narcotics have been used. In addition, the intactness of the surgical dressing, bowel sounds, return of sensations and movements in the leg and monitoring of intravenous infusions and urinary output. Lab tests to ascertain the level of hemoglobin also need to be assessed by the nursing supervisor. Following the fourth stage other evaluations including breasts and nipples are performed and the temperature, blood pressure and heart rate of the mother are constantly monitored. Breast examination is carried out and the infant nursing is monitored. The mother is also taught to palpate the fundus following discharge for the next couple of days. Additionally the mother is also educated about the diet and water that need to be consumed. The legs are also checked for varicose and thrombophlebitis and the mother is encouraged to walk at the earliest. In case of C-section the mother is encouraged to change positions frequently and to walk at the earliest possible with help. Bowel sounds are also examined and leg exercises are taught to reduce deep vein thrombosis. Parents are taught how to handle the infant and facilitate bonding between the baby and parents. Final

assessments also include educating the mother about feeding and caring for the infant in addition to taking care and recouping her health.

The video has elaborated on the various assessments that need to be carried out by the nursing staff during the early and late postpartum period in order to ensure good health for the mother and the baby. The various assessments shown in the video is highly useful for clinical practice as it covers all the immediate risk factors, assessments and interventions for both vaginal and cesarean deliveries.