

Creative writing on christie mrn 071467

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**ASSIGN
BUSTER**

2/4/12 gestation 29+1 weeks

My first encounter with Christie was at St Mary community centre, where she had come for her antenatal clinic in the company of her mother Kate. I introduced myself and explained to her that I was a student midwife who was going to follow up with her pregnancy to the end. She agreed and I thanked her for her assent. This was her 5th pregnancy with one home delivery; the other three had been terminated before 8 weeks. By looking at her I could tell that she had a difficult life, at only 21 she barely looked her age. She was a heavy smoker consuming one packet of cigarettes daily though she denied any involvements in hard drugs. I explained to her the need to limit her cigarette smoking or even quit the habit altogether because smoking poses a great danger to her unborn baby. She promised to try and quit smoking gradually though she admitted it would be difficult. She had several rings on her face and her left arm was covered with tattoos. I asked her how she was progressing with the pregnancy and she said that only the baby kicks reminded her of her situation. I informed her that there are a series of laboratory tests that will be done on her and she agreed. These tests I informed her included; haemoglobin level, urinalysis, HIV test, blood group & Rhesus factor and venereal disease research laboratory (VDRL). Her first delivery was a normal vaginal delivery with no complications therefore we didn't expect much problem in this particular pregnancy though I informed her of the need though to observe a number of things like good hygiene and good nutrition for a better outcome. I did the routine check up and her BP was 118/60 mm Hg, fundal height 28 weeks, presentation cephalic , position- right occipital lateral, Foetal heart rate 140-145 bpm with

acceleration was detected with a . Foetal movements were felt with no signs of multiple pregnancies elicited. I reminded her to consider the things we had discussed and we scheduled her next appointment for Tuesday the following week, and I was anxious to see her again.

Christie came for the appointment in the company of a friend, she said she was fine and we did the usual routine assessment. We briefly discussed the issues I had pointed out to her during our last meeting and she seemed reluctant though I never gave up on her. On examination her results were as follows; BP was 118/53 mmHg, heart rate 80bpm, fundal height 33weeks, position- Right occipital lateral , foetal movements felt, foetal heart rate 130-135 with acceleration , on palpation I noticed Christie had a belly ring that looked stretched and inflamed. I advised Christie to remove the belly ring as it made her susceptible to infections in pregnancy but she declined.

On this day she came with her partner Ben, and I introduced myself to him. I asked him how he felt about the pregnancy and he said he was excited as this was going to be his first child. Christie said she had been unwell with vomiting since the night before. She also informed me that during that week her daughter and mother had gastro-enteritis. I advised her to increase her fluid intake and asked her to see her General Practitioner in case the vomiting persisted. The routine ante-natal examinations were as follows: - BP 132/62 mm Hg, fundal height 37 weeks, foetal movements felt, foetal heart rate 140-145 bpm. We scheduled the next appointment for the following week.

5/6/12 Gestation 38 wks 1 day

Christie had no complaints and the routine ante-natal assessment was done. Results were as follows: - Bp 132/81, fundal height 38/40, foetal heart rate 130-135bpm with Doppler and Pin nard, foetal movements felt. She said she had packed for hospital and was ready for the baby.

Christie came in for the appointment with her partner Ben. Christie said she had been getting Braxton hicks, which she said were happening at night but would go away immediately she got out of bed and walked a bit. I educated Christie on the signs of labour and when she had to present herself to the hospital for delivery. Christie had a past positive GBS test in her previous pregnancy and it is the hospital protocol that she should be treated as a GBS positive for this pregnancy.

19/6/12- Gestation 40week 1 day

Christie attended the appointment with her mother and partner. Christie said she was really tired with the pregnant wished for labour to start. Christie said she had a mucosa show that morning but with no contraction, no Rom.

Christie said she was well and a routine antenatal assessment was done BP 132/70 mm Hg, fundal height 39, foetal movement felt, and foetal heart rate 130-135bpm with acceleration. A peri natal ultra sound for post dates was done and an appointment was given at the post date clinic. I explained to Christie that I would be away from work for a week and wished her well in case she went into labour within the period I would be away.

20/6/12

I received a call from D/s saying that Christie was in labour and 7cm dilated.

Unfortunately I was away in Walgett visiting a good friend. I spoke to her briefly on phone, wished her well and promised to visit her the following day.

22/6/12

I visited Christie in postnatal ward, and asked her how her labour was which she said was much faster and easier than the previous one. Her labour started with some slight abdominal cramps and by 10: 00pm that night the pains intensified and she could no longer stay at home. She ruptured her membranes at 1: 00am and she delivered shortly after. She was given an epidural drug for pain relief and oxygen throughout her labour. Christie had no perineal tear neither an episiotomy was given and therefore required no suturing. She felt so proud of herself. She was feeding her baby on formula milk and together with her baby Tom; they were discharged the same day to follow up with community midwife.

3/7/12

I tried to call Christi but she did not answer so I left a brief message.

10/7/12

I received a call from Christie saying she was doing fine, though she found it quite tedious taking care of a toddler. She said she was still formula feeding baby tom who was doing quite well. I asked her if she had any problems or concern, she said no and thanked me for my care and support.