



Clinical Case Record for the Students of Obstetrical Nursing

- Micro birth planning
- Birth preparedness
- Diet and rest
- Breastfeeding
- Sex during pregnancy
- Family planning

- Felt first abdominally and remains confined to the abdomen and groin
- Often disappear with ambulation or sleep
- Does not increase in duration, frequency or intensity with passage of time
- Show absent
- No Cervical effacement and cervical dilatation.

INTRAPARTUM ASSESSMENT

Deciding the Stages of Labor

- **1st stage:** This is the period from the onset of labor pain to the full dilatation of the cervix, i.e. to 10 cm. 1st stage takes about 12 hours in primigravidas and 8 hours in multipara.
 - **Latent stage:**
 - ♦ Cervix is dilated < 4 cm.
 - ♦ Contraction weak (less than 2 contraction in 10 minute).
 - **Active stage:** Cervix is dilated > 4 cm.
- **Second stage:** This is the period from full dilatation of the cervix to the delivery of the baby; this stage takes about 2 hours for primigravida about half an hour for multigravida.
- **Third stage:** This is the period from after delivery of the baby till the delivery of the placenta and membranes. This stage takes about 15 minutes to half an hour.
- **Fourth stage:** This is the first one hour after the delivery of the placenta. This is a critical period as PPH, a potentially fatal complication, is likely to occur during this stage.

True and False Labor Pain

True Labor Pain

- Begins irregular but becomes regular and predictable
- Felt first in the lower back and sweep around to the abdomen in a wave pattern
- Continues no matter what the woman's activity
- Increases in duration, frequency and intensity with passage of time
- Show/blood stained mucous discharge
- Cervical effacement and cervical dilatation.

False Labor Pain

- Begins irregular and remains irregular

Fetal Head Movement During Labor/ Mechanism of Labor

- Head floating, before engagement
- Engagement, flexion, descent
- Further descent, internal rotation
- Complete rotation and beginning of extension
- Complete extension
- External rotation of head and internal rotation of shoulder
- Delivery of anterior shoulder
- Delivery of posterior shoulder.

Care During Labor/Monitoring and Managing the Stages of Labor

1st Stage of Labor

Oxytocin drug for inducing/accelerating labor should not be administered before delivery as their use is associated with high incidence of rupture of the uterus.

Monitoring and Managing 1st Stage of Labor

- **Monitoring**
 - Monitor the following every hour.
 - ♦ **Contraction:**
 - Frequency: How many contraction in 10 minute.
 - Duration: For how many seconds each contraction lasts.
 - ♦ **FHR:** Normal FHR is between 120–160 beats/minute.
 - Presence of any sign of an emergency. (Difficult in breathing, shock, vaginal bleeding convulsion and unconsciousness.)
 - Monitor the following every four hours:
 - ♦ Cervical dilation
 - ♦ Temperature



Obstetric History

S. No	Year	Term/preterm	Abortion/stillbirth	Nature of delivery	Child		Immunization	Growth and development	Nature of puerperium	Remark
					Alive	Sex/weight				

Personal History

Allergies to drug : Body built :
 Habit : Smoking/alcohol/betel chewing/any drug addiction :
 Dietary habits : Vegetarian/nonvegetarian :
 Hobbies : Diet per day - 2/3/4/5/6 :

Present and Past Medical History

Hypertension/diabetes/breathlessness on exertion/palpitation/tuberculosis/asthma/renal disease/convulsion/jaundice/malaria/RTI/STI/HIV/AIDS/no any/if any other specify

Family History

Family history of systemic illness: Hypertension/Diabetes/Tuberculosis/No any

Blood disorder: Thalassemia/Repeated blood transfusion

Delivery of: Twins/Congenital abnormalities

Examinations of Client

General Examinations

Height :cm Temperature :F Respiration :breath/mint
 Weight :kg Pulse :beats/mint BP :mm Hg



Antenatal Assessment (Case No. 4)

Client's Profile

Name : Education :
Age : Occupation :
Hospital name : Income per month :
Date of booking : Marriage duration :
Reg. No. : W/o :
Religion : LMP :
Parity : EDD :
Address :
Period of gestation :

Menstrual History

Age at menarche : year of age Blood flow : average/scanty/heavy
Cycle of : days Dysmenorrhea :
Period duration of : days

History of Present Pregnancy

No. of antenatal visits : Immunization Status :

Tick mark (✓), if present

Nausea/Vomiting/Back ache/Constipation/Frequency of Micturition/Leaking of watery fluid through vagina/Vaginal bleeding/Severe headache/Blurred vision/Difficulty in breathing/Palpitation/Decrease or absent fetal movement/Acidity/generalized swelling of body or face/Fever



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