Labor & Delivery Nursing Assessment Checklist

NAME:_____**DATE**_____

LEVEL OF COMPETENCE

1. No experience – Never or observed only
2. Needs Assistance – Occasionally practices
3. Performs Independently – Consistently practices
4. Serves as Resource/Preceptor - frequently practices

LABOR AND DELIVERY SKILLS	1	2	3	4		1	2	3	4
I. MEDICATION ADMINISTRATION					Cesarean Prep – Perineal Prep				
Knowledge of Administration Protocol & Side Effects of:					Prepare Patient Physically for Labor				
Analgestics					Prepare Patient Psychologically for Labor				
Antibiotics					Provide Care & Monitor After Rupture of Membrane				
Anticonvulsants					Support Labor Coach as needed				
Calcium Gluconate									
Corticosteriods					**DELIVERY INTERVENTIONS**				
During					Assist Physician with Anesthesia during Delivery				
Hemabate									
Heparin					Circulate for: Cesarean Section				
Hydralazine					Circulate for: Minor Surgical Procedure.				
Insulin					Circulate for: Postpartum Tubal Ligation				
Magnesium Sulfate					Circulate for: Vacuum Extraction				
Methergine					Circulate for: Vaginal Delivery				
Narcotics					Documents Delivery On Patient				
Oxytocin					Chart & Logbook				
Ritodrine					Initiate Emergency Protocols if needed				
Terbutaline					Knowledgeable of AWHONN Standard of Practice				
Calcuim Chloride					Performs Controlled Emergency Delivery in absence of doctor				
II. GENERAL OBSTETRICAL MANAGEMENT					Scrubs for:				
Assessment of **Labor**:					Cesarean Section				
Assess for Risk Factors					Minor Surgical Procedure				
Cervical Dilation and Changes					Postpartum Tubal Ligation				
Cervical Effacement and Changes					Vacuum Extraction				
Duration of Contractions					Vaginal Delivery				
Frequency of Contractions					Sterile Set Up:				
Identity of Fetal Part					Birthing Room				
Obtain OB History					Cesarean Delivery				
Psychological/Behavioral Status of Patient					Delivery Room				
Quality of Contractions					Forceps / Vacuum Vaginal Delivery				
Station of Presenting Part					Spontaneous Vaginal Delivery				
Assist with:					Assist Physician with Anesthesia during delivery				
Amnioinfusion									
Collection of Cultures					**CARE OF INFANT**				
Epidural Catheter Placement					Assess and Assign Apgar Score				
					Cord Blood Samples				

LABOR AND DELIVERY SKILLS	1	2	3	4		1	2	3	4
III. LABOR MANAGEMENT INTERPARTUM ASSESSMENT					Chest Percussion				
					Dextrostix				
Assess Maternal vs. Per Stage of Labor					Establish and Maintain Patent Airway				
Assist with Insertion of IUPC					Eye Care				
Assist with placement of FSE					Hematocrit				
Correctly Interpret & Document Fetal Status:					Identification Process Bracelet / footprints				
Apply Tocotransducer and Ultrasonic FHM					Initiate Emergency Measures				
Identify Indicators of Fetal Distress					Knowledgeable of S/S Infant Distress				
Initiate Emergency Measures for Fetal Distress					Physical Exam of Newborn:				
Report Fetal Distress to Physician					Assess for Anomalies				
Interpret Data:					Respiratory Status				
Fetal Heart Pattern					Prevention of Heat Loss				
Uterine Contraction Pattern					Promote Bonding Process				
Knowledgeable of Calibration of Machine					Suction:				
Knowledgeable of Lead Connections					Bulb				
Use of Doptone (US Doppler)					Wall				
Use of Fetoscope					Transfer to Nursery				
Use of Radiant Monitor					Weight				
INTRAPARTUM INTERVENTIONS									
Assist with Amniotomy									
Care of Patient for Anesthesia					**POSTPARTUM – RECOVERY PERIOD**				
Administration:					Accurate Assessment and Documentation of:				
Assist Physician with Induction					Amount and Character of Lochia				
Documentation					Bladder Status				
General					Fundal Consistency and Height				
Positioning					Incision				
Protocol for Consent					Cesarean				
Regional: Epidural					Episiotomy				
Local Infiltration					Perineal Care				
Spinal					Post-Anesthesia Assessment Score				
Coach with Breathing and Relaxing Techniques					Provide Period of Bonding				
Conduct Vaginal Exam					Psychological Status				
					Report Condition to Postpartum Unit				
IV. CARE OF PATIENT WITH:									
Abrupto Placenta									
Asthma									
Cardiac Disease					**II. MEDICATION**				
Cystitis					Depo Provera				
Diabetes Mellitus					Ergotamine Preparation				
Drug Abuse					Hormone Preparations				
Eclampsia					MagSo4				
Hemorrhage					Methergine				
Hypotension from Regional Anesthesia					Oxytocin-Pitocin Drip				
Infectious Disease					Parlodel				
Malpresentation					RHoGam Preparation				

LABOR AND DELIVERY SKILLS	1	2	3	4		1	2	3	4
Multiple Gestation					Rubella Vaccine				
Neuromuscular Disease					Suppositories				
Paralysis					Trace				
Placenta Previa					Vaginal Creams				
Pre-Eclampsia									
Pregnancy-Induced Hypertension					**III. BIRTH CERTIFICATION**				
Premature Labor					Complete a Birth Certificate and Record				
Prolapsed cord									
Pyelonephristis					**IV. POST-BIRTH CARE**				
Respiratory Arrest					C-Section				
Rh Incompatibilities					Abdominal Dressing				
Ruptured Uterus					Incentive Spirometry				
Sickle Cell Disease					Pain Relief				
Seizures					Preeclampsia				
					Transverse vs. Classic Incision				
V. OBSTETRICAL PROCEDURES					Epidural Anesthesia				
Adoption Protocol					Natural Childbirth				
Aseptic Technique for **Delivery** Room					Spinal Anesthesia				
Aseptic Technique for **Labor** Room					Activity				
CPR:					Diet				
Adult					Elimination				
Infant					Fundus				
Assist with Intubation					Lochia				
Assist with Umbilical Artery					**V. MATERNAL CARE HOME INSTUCTIONS**				
Catheter Insertion					Activity Level				
C-PAP Bag					Breast Care				
Chest Compressions					Emotional Adjustments				
Emergency Medications					Follow-Up with Physician				
Documentation for Hospital/State Protocols					Medications				
Fetal Demise					Ovulation and Menstruation				
Induction of **Labor**:					Perineal Care				
Comfort Measures					Recognizing Signs of Infections				
Medication Protocol									
Provide Psychological Support					**NEWBORN NURSERY**				
Signs and Symptoms of Complications					**I. ADMISSION FROM:**				
Intake and Output					C-Section				
Specimen Collection					**Delivery** Room – Vaginal Birth				
Stress Test – Oxytocin Challenge Test:					Outside **Delivery** Area				
Contraction Stress Test									
Non-Stress Test					**II.DAILY CARE**				
Surrogate Mother Protocol					Circumcision Care				
					Cord Care				
POSTPARTUM SKILLS					Feeding				
I. MONITOR / INSTRUCT PATIENT ON:					Bottle				
Bladder Care					Breast				

LABOR AND DELIVERY SKILLS	1	2	3	4		1	2	3	4
Distension					NG				
Empty Bladder					Skin Care				
Intervention if Unable to Void					Infant Bath				
Bowel Care:					Infant Elimination				
Hemorrhoids					Infant Follow-up				
Incision Care					Infant Sleep Patterns				
Perineal Care					Need of PKU Testing				
Breast Care					Recognize Signs of Infections				
Bottle Feeding									
Breast Feeding									
Breast Pump									
Breast Engorgement					**III. DEMONSTRATE PROPER TECHNIQUE FOR THE FOLLOWING PROCEDURES**				
Episiotomy Care					Assisting with Circumcisions				
Heat Lamp					Exchange Transfusion				
Peri-Care					Gastric Lavage				
Sitz Bath					NG Tube Insertion				
Tubal Ligation					NT Suction				
Ultrasound									
Nasogastric Suctioning									
Bulb					**VI. SPECIMEN COLLECTION**				
Phototherapy Lights					Cultures				
Postural Drainage and PT					Blood				
Gastric					Skin				
IV. MEDICATION ADMINISTRATION					Cord				
Antibiotic					Heel Stick				
Erythromycin Ointment					Stool				
Silver Nitrate					Urine				
Vitamin K Preparation									
Hepatitis Vaccination									
V. USE AND MAINTAIN THE FOLLOWING EQUIPMENT									
Automatic B/P Machine									
Breast Pump									
Cardio-Respirator Monitor									
Infant Scales									
Isolette									
Radiant Warmer									

ELECTRONIC FETAL MONITORING COMPETENCY VALIDATION

NURSING PRACTICE COMPETENCIES	1	2	3	4
1. Explains the use of electronic fetal monitor to the patient and her support person(s)				
2. Chooses the appropriate electronic fetal monitoring method based on hospital policy or procedure				
3. Applies external transducers and adjusts the electronic fetal monitor accordingly				
4. Describes the limitations of information produced by external transducers				
5. Prepares the patient, sets up equipment, and completes connections for fetal electrode and intrauterine pressure catheter				
6. Calibrates the monitor for the use of the intrauterine pressure catheter				
7. Identifies artifacts and technically inadequate tracings and takes appropriate corrective action				
8. Obtains and maintains an adequate fetal heart rate and uterine contraction tracing				
9. Interprets uterine contraction frequency, duration, strength, and baseline resting tone as appropriate based on monitoring method, and determines if abnormal findings are present.				
10. Identifies baseline fetal heart rate, baseline variability, and the presence of periodic changes and determines if findings are reassuring or non-reassuring				
11. Implements appropriate **nursing** intervention based on electronic fetal monitor findings.				
12. Identifies the clinical situations based on electronic fetal monitor findings in which immediate physician notification is appropriate				
13. Communicates the content of electronic fetal monitoring data, its interpretation, and resulting **nursing** intervention in written and verbal form in an appropriate and timely manner.				
14. Documents appropriate entries on the electronic fetal monitoring strip chart and patient record				
15. Demonstrates appropriate maintenance of electronic fetal monitoring equipment				

YOUR EXPERIENCE

YOUR EXPERIENCE	
How many years have you worked in Labor & Delivery	_____ yrs
How many years have you worked in Newborn Nursery	_____ yrs
How many years have you worked in Postpartum	_____ yrs