



Name/Title _____

The University of Texas Medical Branch at Galveston
Education Resource Center
Nursing Service: Competency Based Orientation
Basic RN Competencies: Labor and Delivery (High and Low Risk)

Competency Statement: *Upon completion of orientation, the Registered Nurse in collaboration with the patient/family and health team members utilizes the nursing process and age-specific developmental principles when providing care for selected patients*

Performance Criteria	Validation of Performance <i>Preceptor confirms: Performs according to AWHONN and UTMB standards, guidelines, and/or protocol</i>	Self Assessment				Date Competency Met/Validator's Signature	Learning Options <i>>Patient care w/ preceptor >Skill demo/return demo >Read pertinent policies >Read related section in reference texts.</i>	Action Plan	Comments
		Have you ever done this before?		Are you competent performing?					
		Yes	No	Yes	No				
Reproductive System Performs maternal and fetal admission assessment	Completes admission assessment Recognizes urgent or emergent care needs. Initiate social service consult for teen patient.						▶ <input type="checkbox"/> Review practice competencies and standards for care of the antepartum patient AWHONN ▶ <input type="checkbox"/> A/V Selection: AWHONN videotape series.		
	Assists with vaginal or speculum examination: Collects specimen								

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Assesses fetal well-being Assesses, interprets, and manages fetal monitor findings.	Applies fetal monitor Selects monitoring method Assesses parameters -Methods for verification of fetal well being -Non-reassuring fetal monitor strip -Nursing interventions for maternal and fetal response -Frequency of electronic fetal monitor (EFM) assessment -Methods to validate information acquired from the EFM -Technically inadequate monitor strip and utilizes corrective measures Uses monitoring equipment safely: Alarms are on based on clinical settings. Settings are individualized to patient condition. Demonstrates appropriate response to alarms. Documents alarms set and reviewed.					<ul style="list-style-type: none"> ▶ <input type="checkbox"/> View AWHONN video tape ▶ <input type="checkbox"/> Attend basic fetal monitoring class ▶ <input type="checkbox"/> Read "Fetal Monitoring and Assessment" by Susan Tucker or other fetal monitoring text. ▶ <input type="checkbox"/> Review protocol on EFM and Antepartum Fetal Surveillance ▶ <input type="checkbox"/> Review AWHONN position statement titled "Nursing Responsibilities in Implementing Intrapartum Fetal Heart Rate Monitoring" ▶ <input type="checkbox"/> Attend EFM Strip conference 			

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Cares for patient in first stage of labor	Identifies latent, active and transitional phases of labor Identifies physiologic and psychological changes of labor and notifies MD of patient status Assesses patients level of comfort and determines interventions Identifies techniques to facilitate fetal descent Instructs and assists with breathing/pushing techniques					<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Completes fetal monitor test with score of at least 80% ▶ <input type="checkbox"/> View video tape "Intrapartum Care" AWHONN ▶ <input type="checkbox"/> Review AWHONN Practice competencies and standards for antepartum care 			
Cares for patient in the second stage of labor	Prepares patient/family for impending delivery Assembles equipment, sets up sterile delivery instrument table Assures availability of emergency equipment and radiant warmer Positions patient to prevent injury and facilitate delivery Performs perineal scrub								
Cares for the newborn in the delivery room:	Performs baseline and ongoing assessment Assures patent airway Initiates respiratory support Dries and wraps baby Completes newborn identification process Obtains newborn cord blood samples					<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Attend class on bag and mask ventilation at the resuscitation stand or neonatal resuscitation course. 			
	Assists in stabilization and emergency procedures Performs CPR when appropriate Calls neonatal code					<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Attend Neonatal Resuscitation Course ▶ <input type="checkbox"/> Attend class on delivery room emergencies 			

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	Identifies patient experiencing shoulder dystocia and initiates nursing intervention Initiates maternal infant bonding process						<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Observe preceptor demonstrating McRoberts maneuver 		
Cares for the patient in the delivery room	Performs postpartum assessment including B/P, P, R, tone and height of uterus, and amount of bleeding Identifies post partum hemorrhage and intervenes						<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Review L&D Hemabate protocol 		
Cares for the OB patient receiving analgesia	Identifies analgesics used in labor (use, action contradictions, maternal/fetal side effects and nursing interventions) Identifies location, use, and action of narcotic antagonist in mothers and newborn Recognizes when conscious sedation procedures need to be initiated Assesses labor status and EFM strip for fetal status prior to administration						<ul style="list-style-type: none"> ▶ Read "Position Statement on the Role of the Registered Nurse in the Management of Patients Receiving IV Conscious Sedation for Short-Term Therapeutic, Diagnostic, or Surgical Procedures," available from AORN and the American Nurses Association 		

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Cares for a patient following regional anesthesia	Identifies type of regional block, anesthetic(s) used, time of last dose Assesses sensation in affected extremities; level of sensation in spinal and/or epidural blocks Observes patient for potential complications, esp hypotension, bladder distention, and respiratory depression. States criteria for discharge of patients receiving regional anesthesia						▸ <input type="checkbox"/> Review "Care of the Patient With Epidural/Spinal Anesthesia" Guidelines		
Cares for the postpartum patient	Assesses vs, fundal height and tone, perineum and lochia every fifteen minutes Identifies: -Hemorrhage -Uterine atony -Bladder distention Assists with perennial care						▸ <input type="checkbox"/> Review L&D protocol on Hemabate		
Care of the patient with preterm labor (PTL)	Recognizes S/S of PTL Administers tocolytic agents Identifies complications contraindications for tocolysis and S/S MgSO ₄ toxicity Anticipates and prepares for delivery of preterm infant if tocolysis unsuccessful or contraindicated						▸ <input type="checkbox"/> Review L&D protocol for preterm labor		

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Care of the hypertensive OB patient	Recognizes S/S PIH and chronic hypertension Recognizes S/S of MgSO ₄ toxicity Administers Ca Gluconate Anticipates and prepares for delivery of potentially compromised infant						<ul style="list-style-type: none"> ▸ <input type="checkbox"/> Review AWHONN standards on care of the high risk OB patient ▸ <input type="checkbox"/> Read chapter on hypertensive disorders in <u>Manual of High Risk Pregnancy and Delivery</u> by Gilbert & Harmen. ▸ <input type="checkbox"/> Review L&D protocol PIH MgSO₄ coverage ▸ <input type="checkbox"/> Review AWHONN Standards On Care of the High Risk Ob Patient 		
Cares for the patient with 3rd trimester bleeding	-Assesses bleeding characteristics and uterine tone -Identifies possible causes of bleeding -Estimates blood loss -Initiates perineal pad count						<ul style="list-style-type: none"> ▸ <input type="checkbox"/> Read "Disseminated Intravascular Coagulopathy" in <u>Highrisk Pregnancy & Delivery</u> by Gilbert & Harmon. ▸ <input type="checkbox"/> Read Hemabate protocol 		
Care of the patient with induction of labor	Identifies: -Indications and contra-indications for induction or augmentation -Methods of induction and augmentation -Potential maternal/fetal problems						<ul style="list-style-type: none"> ▸ <input type="checkbox"/> Review AWHONN Technical Bulletin on Induction and Augmentation of Labor ▸ <input type="checkbox"/> Review protocol on Induction of Labor ▸ <input type="checkbox"/> Review Bishop scoring system 		
Cares for the labor patient with diabetes	Identifies potential maternal/ fetal complications during labor and delivery and nursing interventions for these complications						<ul style="list-style-type: none"> ▸ <input type="checkbox"/> Review L&D protocol for continuous insulin infusion ▸ <input type="checkbox"/> Read "Diabetes" in <u>Highrisk Pregnancy & Delivery</u> by Gilbert & Harmon. 		

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Cares for an eclamptic patient	Assesses and Documents -Reflexes, LOC, RR, SpO2, BP, edema Lab Values, Urine Output, Urine Testing Positions patient for optimal CO -Utilizes supports, padding, and evaluates patient for skin condition						<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Practice positioning in simulated clinical setting ▶ <input type="checkbox"/> Review article on Provost Utah study 		
Cares for a patient requiring fluid management	Assesses the patient's Estimated Blood Loss, length of NPO status, age, physical health, surgical procedure and vital signs Uses available formulas to calculate fluid deficit, normal maintenance and blood replacement Takes into account fluids (crystallized and colloid) already replaced States significance of urinary output, changes in vital signs and mental status to fluid balance								
Evaluates EKG Monitor	Calculates rate from monitor Recognizes dysrhythmias						▶ <input type="checkbox"/> Attends Basic Dysrhythmia		
Cares for a patient following obstetrical surgery	ABDOMINAL: Checks all dressings, abdominal and possibly vaginal, and reevaluates at least once every hour during stay Assesses fundus for tone and height, massages as needed						▶ <input type="checkbox"/> View video "Care of Post Partum Patient"		

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	VAGINAL: Evaluates perineum Evaluates type and amount of bleeding Begins pad count when bleeding is abnormal								