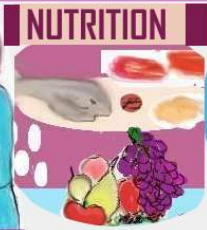


SIMPLIFYING MATERNAL NURSING

PART 1



INTRODUCTION

Welcome to "Simplifying Maternal Nursing". The goal of this program is to make learning about fetal and maternal development very, very simple.



Learning Objectives

- relate initial assessment and history of the pregnant woman
- discuss signs and symptoms of pregnancy
- discuss the uterus and the role of estrogen and progesterone
- discuss prenatal lab values, Braxton Hicks contractions and Quickening
- identify types of pelvis
- discuss nutrition and exercise



IN THE DOCTOR'S OFFICE

MRS. L I WILL NEED TO GET SOME INFORMATION FROM YOU.



I AM GOING TO CHECK YOUR WEIGHT.



NORMAL WEIGHT GAIN
25 -35 lbs.

- BLOOD PRESSURE
 - PULSE RATE
 - FETAL HEART RATE
- ARE ALL CHECKED AND RECORDED DURING THE PRENATAL VISITS

HISTORY AND PHYSICAL

A HISTORY IS TAKEN AT THE FIRST PRE-NATAL VISIT. SIGNIFICANT INFORMATION REGARDING LAST MENSTRUAL PERIOD, STILLBIRTHS, ANY PREVIOUS PREGNANCIES, ABORTIONS WHETHER SPONTANEOUS OR ELECTIVE WILL BE INCLUDED.

HEIGHT AND WEIGHT ARE ALSO RECORDED.

EDD (EXPECTED DATE OF DELIVERY) IS ALSO CALCULATED. NAGELE'S RULE IS ONE OF THE METHODS USED FOR EDD. THIS IS IMPLEMENTED BY COUNTING BACK THREE MONTHS FROM THE FIRST DAY OF THE LAST MENSTRUAL PERIOD AND ADDING SEVEN DAYS. TYPICALLY, PREGNANCY LASTS AROUND 40 WEEKS. SOME PREGNANCIES MAY NOT LAST AS LONG AS 40 WEEKS.

FETAL DEVELOPMENT:
THE FIRST THREE WEEKS IS KNOWN AS THE PRE-EMBRYONIC OR ZYGOTE STAGE.
THE NEXT FOUR TO EIGHT WEEKS ARE KNOWN AS THE EMBRYONIC STAGE.

THE GROWING FETUS



THE FETAL STAGE = WEEKS 9- 40.



PRE-EMBRYONIC OR ZYGOTE STAGE

DOCTOR I FEEL TIRED, MY BREASTS FEEL TENDER AND I FIND MYSELF URINATING MORE FREQUENTLY.

I WILL EXAMINE YOU AND RUN SOME TESTS.

I feel dizzy and nauseated.

Breast tenderness and heaviness

SIGNS AND SYMPTOMS OF PREGNANCY INCLUDE:

- fatigue
- frequent urination
- breasts tenderness
- nausea and vomiting
- digestive problems like heartburn
- dizziness, amenorrhea (absence of menstrual period)

MRS.L IS ABOUT TO FIND OUT SHE IS PREGNANT.

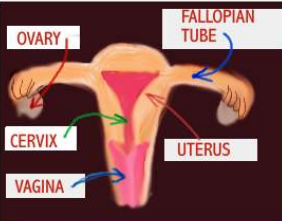
DURING THE FIRST TRIMESTER OF PREGNANCY, PATIENTS MAY EXPERIENCE ANY OF THESE SYMPTOMS:

PREGNANCY TESTING

MRS.L'S PREGNANCY

TEST WAS POSITIVE.

A PREGNANCY TEST IS DONE TO DETERMINE WHETHER A PATIENT IS PREGNANT. HCG (HUMAN CHORIONIC GONADOTROPIN) IS USUALLY PRESENT IN THE BLOOD OR URINE OF A PREGNANT WOMAN AND IS USED AS THE LANDMARK FOR PREGNANCY TESTING.



THE UTERUS, OVARIES, FALLOPIAN TUBES, CERVIX AND VAGINA ARE ALL PARTS OF THE FEMALE REPRODUCTIVE SYSTEM. THE UTERUS IS A HOLLOW, MUSCULAR ORGAN WHICH IS LOCATED IN THE PELVIS. THE ENDOMETRIUM LINES THE UTERUS AND IS SHED MONTHLY (MENSTRUAL PERIOD), IF AN OVUM IS NOT FERTILISED. ANOTHER IMPORTANT FEATURE OF THE UTERUS IS,THE SMOOTH MUSCLE(MYOMETRIUM) OF WHICH IT IS MADE. THE MUSCLE FIBRES HAVE THE ABILITY TO CONTRACT AND RELAX DURING LABOR.

THE UTERUS LOOKS LIKE A PEAR TURNED UPSIDE DOWN.



CHLOASMA "MASK OF PREGNANCY" MAY RESULT FROM INCREASED PIGMENTATION, CAUSED BY HORMONAL ACTION.

ESTROGEN AND PROGESTERONE ARE HORMONES WHICH PLAY A VERY IMPORTANT ROLE IN PREGNANCY. THEY ARE FIRST PRODUCED BY THE OVARIES AND LATER THE PLACENTA. THEY KEEP THE UTERUS AND THE PLACENTA HEALTHY AND ENHANCE LACTATION. DIGESTIVE DISCOMFORT MAY OCCUR AS A RESULT OF THE ACTION OF THESE HORMONES. NASAL STUFFINESS MAY OCCUR BECAUSE OF THE EFFECTS OF ESTROGEN. THE GLOW OF PREGNANCY IS ALSO INFLUENCED BY HORMONAL ACTION.

PATIENT EDUCATION

MRS.L I WILL NEED TO DRAW SOME BLOOD FROM YOU.



Braxton Hicks contractions

Mild uterine contractions that may start around the second trimester, but are more frequent in the third trimester of pregnancy. The uterus contracts and relaxes. A full bladder may sometimes cause these contractions.

PRENATAL BLOOD TESTS



ON THE INITIAL PRENATAL VISIT, BLOOD IS DRAWN FOR LAB VALUES. THESE INCLUDE:

- RUBELLA TITER,
- HEMOGLOBIN AND HEMATOCRIT
- BLOOD RH TYPE AND ANTIBODY FACTOR
- HIV , SYPHILIS , GONORRHEA AND CHLAMYDIA SCREEN
- PAP SMEAR,
- HEPATITIS SCREEN

Quickening- subtle fetal movement that may begin around 16-20 weeks. It may feel like gastric discomfort or mild movement.

Prenatal vitamins and dietary advice are usually taken care of at the time of the prenatal visit. Abnormal lab values are addressed and treated as necessary.

TYPES OF PELVIS



GYNECOID
PELVIS



ANDROID
PELVIS



ANTHROPOID
PELVIS



PLATYPELLOID
PELVIS



ASSESSMENT OF THE PELVIS (PELVIMETRY) IS AN IMPORTANT CONSIDERATION AS THE FETUS CONTINUES TO GROW. THERE ARE 4 TYPES OF PELVIS:

- THE GYNECOID PELVIS WHICH IS CONSIDERED TO BE THE BEST FOR VAGINAL DELIVERY.
 - ANDROID PELVIS WHICH IS THE TYPICAL MALE PELVIS. IT IS NARROWER THAN THE GYNECOID PELVIS AND MAY CAUSE LABOR AND DELIVERY TO BE MORE DIFFICULT.
 - ANTHROPOID PELVIS (APELIKE PELVIS) IS KNOWN TO BE WIDER FROM BACK TO FRONT AND NARROWER FROM SIDE TO SIDE.
 - PLATYPELLOID PELVIS IS FOUND IN ONLY A SMALL PERCENTAGE OF WOMEN. IT IS WIDE FROM SIDE TO SIDE AND NARROW FROM FRONT TO BACK.
- HORMONAL ACTION CAUSES THE PELVIS TO BECOME LESS RIGID DURING PREGNANCY.

PREGNANCY AND NUTRITION



THE PREGNANT MOTHER SHOULD BE EDUCATED ON THE IMPORTANCE OF EATING A BALANCED AND NUTRITIOUS DIET. IT IS NOT UNCOMMON FOR THE PREGNANT WOMAN TO HAVE SPECIAL FOOD CRAVINGS. SOME FORM OF EXERCISE SHOULD BE ENCOURAGED. THE DOCTOR CAN ADVISE WHICH EXERCISES ARE SAFE.

THE GROWING FETUS

THE
GROWING
FETUS
AROUND
11 WEEKS



PART 2 TO
FOLLOW