



# **SIERRA VIEW DISTRICT HOSPITAL**

# **BEST PRACTICES**

**#1 BEST PRACTICE**

**CATEGORY**

**DOCUMENTATION**

SIERRA VIEW DISTRICT HOSPITAL

LABOR PROGRESS CHART

Admit Date / /		Admit Time		Blood Type and RH		Hbsag _____ Rubella _____		RPR _____ GBS _____		Age	G	T	Pt	A	L	EDD ____/____/____	LMP ____/____/____		
Current Date / /		<b>TIME</b> →																	
VITAL SIGNS	Temperature																		
	Pulse																		
	Respirations																		
	Blood Pressure																		
	O2 SATS																		
	Blood sugar																		
	Deep tendon reflexes (L/R)	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/		
	Urine (protein/sugar)	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/		
	Headache																		
	Visual Changes																		
	Epigastric Pain																		
FETAL ASSESSMENT	Monitor Mode																		
	Baseline (FHR)																		
	Variability																		
	Accelerations																		
	Decelerations																		
	Membranes/fluids																		
UTERINE ACTIVITY	Category																		
	Monitor Mode																		
	Frequency																		
	Duration																		
	Peak IUP																		
	Resting Tone																		
	Intensity																		
INTAKE/OUTPUT	MVUs																		
	Patient related intensity																		
MEDICATION	IV																		
	PO																		
	Urine																		
	Emesis																		
MEDICATION	Pitocin mU/min																		
	Magnesium Sulfate-IV-GM/Hour																		
	Stadol																		
INTERVENTION	Treatments																		
	Teaching/support																		
	Position/activity																		
	O2 Mask																		
INITIALS																			
<b>FETAL MONITOR MODE</b> A = Auscultation (fetoscope) E = External I = Internal D = Doppler		<b>UTERINE ACTIVITY MONITOR MODE</b> P = Palpation E = External I = Internal		<b>VARIABILITY</b> ∅ = 0-2 BMP=Absent    += 6-25 BMP=Moderate ↓ => 5 BMP= Minimal    ↑ => 25 BMP=Marked				<b>ACCELERATIONS</b> ++=15 BMP ↑x 15 sec    += <15 BMP ↑/or <15 sec    0= None <b>DECCELERATIONS</b> N=None    L=Late    E=Early    V=Variable    P=Prolonged				<b>MVUs MONTEVIDEO UNITS</b> The sum of the peak of each uterine contraction minus its resting tone, in a 10 minute period.							



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LABOR PROGRESS CHART Page 1

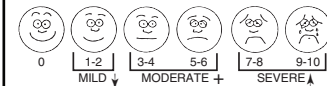
DATES: FROM \_\_\_\_\_ TO \_\_\_\_\_




PATIENT'S LABEL



Membranes <b>Intact</b> Ruptured SROM AROM Bulging Date ___/___/___ Time		Medication allergy/sensitivity <input type="checkbox"/> None (Identify)					Page ____ of ____										
Current Date <b>TIME</b> →																	
VITAL SIGNS	Temperature																
	Pulse																
	Respirations																
	Blood Pressure																
	O2 SATS																
	Blood sugar																
	Deep tendon reflexes (L/R)	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
	Urine (protein/sugar)	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
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	Peak IUP																
	Resting Tone																
	Intensity																
	MVUs																
	Patient rated intensity																
INTAKE/OUTPUT	IV																
	PO																
	Urine																
	Emesis																
MEDICATION	Pitocin mU/min																
	Magnesium Sulfate-IV-GM/Hour																
	Stadol																
INTERVENTION	Treatments																
	Teaching/support																
	Position/activity																
	O2 Mask																
INITIALS																	

<b>MEMBRANES</b> I=Intact B=Bulging R=Ruptured <b>FLUID</b> C=Clear M=Meconium Stained B=Bloody F=Foul Odor N=No foul odor	 PAIN: PATIENT RATES THE PAIN 0-10	<b>DEEP TENDON REFLEXES</b> 0= No response +1= Sluggish +2= Normal +3= Hyperactive +4= Brisk + Hyperactive C= Clonus	<b>TREATMENTS</b> O2= O2L/min IVB= IV Bolus SC= Straight Catheterization FC= Foley Catheterization ABD= Abdominal hair removal	<b>POSITION/ACTIVITY</b> W= Walking K= Kneeling C= Chair LS= Left Side SQ= Squatting RS= Right Side SH= Shower KC= Knee chest T= Trendelenburg	<b>TEACHING/ SUPPORT</b> O= Orient to unit SR= Safety review LR= Labor review F= Focusing BRT= Breathing/Relaxation Techniques PrO= PreOp.
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**LABOR PROGRESS CHART** Page 3

Form # 011115 REV. 5/09 CVBF

DATES: FROM \_\_\_\_\_ TO \_\_\_\_\_  
 CHART - MEDICAL RECORD ROOM # \_\_\_\_\_

PATIENT'S LABEL

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**#2 BEST PRACTICE**

**COLLABORATIVE  
STRIP  
REVIEW**

# FETAL MONITORING STRIP REVIEW REPORT

## 2<sup>nd</sup> Quarter, 2010 - 5/21/2010- Case 1

**TOPIC:** Fetal monitor strip review. The strip was reviewed for the following criteria as bolded below.

- 1. Apgar < 7 @ 5 minutes**
2. Term infant with admission to NICU from NBN
3. Prolonged Instrument Delivery
4. Inductions less < 39 weeks gestation
5. Shoulder dystocia with transfer to NICU
6. C/S for non-reassuring fetal status
7. C/S for obstetrical emergency

**DATA INTEGRITY:** The report was generated after Chart and Strip review

### CASE SUMMARY

This case involved a 36-year-old gravida 13, para 6, Ab 6, at 40 + 2 days weeks gestation admitted on 4/17/10 @ 1100 for Induction of labor. VE FT/th/-3 and membranes intact. Category I strip with positive accelerations and moderate variability and no decelerations noted. 4/18/10 @ 0008- SROM clear fluid and VE 2/60-70/-3 and 4<sup>th</sup> dose of Cytotec given. 0140- FSE applied for better tracing and O2 @ 10L/mask and VE 3/70/-1.

**0230-** Strip review started. FHR 120. Category 1 strip documented with moderate variability and no decelerations and positive accelerations.

**0300-** FHR 125. Category I with moderate variability and positive accelerations and no decelerations. VE 5-6/90/-1. Requesting Epidural

**0330-** Epidural complete and bolus given. VE 9/C/-1. Category II and moderate variability, positive accelerations and variable decelerations.

**0400-** MD @ bedside. VE Complete, pushing ineffective. Pt. to labor down. Category II with moderate variability, positive accelerations and variable decelerations noted.

**0430-** Pushing. Category II, moderate variability, no accelerations and variable decelerations.

**0456-** Viable male delivered by Vaginal delivery with vaccum assit. Apgars 6,7,8

### STRIP REVIEW FINDINGS:

- Category I documented, found to be Category II due to late decelerations.
- Category II documented but there was no mention of accelerations or late decelerations.
- No documentation noted for the last 30 minutes of the strip which was Category III with no accelerations, variable and late decelerations and prolonged decelerations.
- It was agreed in the strip review with the MD's and Nurses that the nurse did not always accurately document Categories, variability and decelerations.

### ACTIONS

- Report findings to OBGYN committee meeting for analysis and further recommendations.