Labor & Delivery Cheat Sheet

Sestational 2:140/90, x2 at least 4 hours aper after 2 hours aper aper aper 2 hours approximate a hours approximate hours approximate a hours approximate hours approximate a hours hours approxima	Blood Pressure Disorders					Triage High Yield Problems					
HTN 4 hours apart after 20 weeks GA Delivery at 337 Labor Check SE done 5/ 210; bit merce (Like) meterminate, consider AEI (#inderminate) inderminate, consider AEI (#inderminate) meterminate, consider AEI (#inderminate) aEI (#i											
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Chronic HTN 2140/90 prior to 20 weeks GA Treatment indicated if b presistent 2140/90 Pretern Labor if b presistent 2140/90 Site to weakers for diagnons of the second pressure Labor Vision of the second pressure Labor Vision of					R/O Rupture		SSE- Pooling, Nitrazine, Ferning. Can do ROM plus if				
weeks GA If bp persistent s140/90, PCR 20.3, 24h urine PCR >00 Admit, induction at time of diagnosis if 327 weeks Decreased Fetal (%) sfmmate 24h urine PCR >00 NST, water and food, have patient use button, optional beddied by so formation 24h urine PCR >00 Pre- ectampsia Wo SF P1 200/101 s2,minutal status Admit, induction at time of diagnosis if 327 weeks Morenterint Woginal 327 weeks NST, water and food, have patient use button, optional beddied Wogener	Chronic HTN					term Labor	SSE to visualize for dilation or bleeding, if FFN indicated, leave				
Pre- celampia DP = 140/90, PCR = 30, Admit, induction at the of diagnosis if 327 weeks Varianti Bisedima SSE_Determine location of pleximal provide plantal 2004 interactions of pleximal provide the aduction used in the point of the status of the stat		weeks GA	if bp persistent				NST, water and food, have patient use button, optional bedside				
ecdampsia 24h urine PCR > 300 time of diagnosis if > 27 weeks Diod pressure Labs: CVP, CEC, pr/c7, TRSS BP, 2, dmit for obs? Pre- Edampsia w/ SF BP 2160/110 x2,minute Start IV MSCO, put, FTS > 20, MMSCO, put, FTS > 20,			≥140/90	D							
eCampaia 24h Unite PCC 5300 unite of oliginosis if any seeks Text with IV meds and fluids if not tolerating PD, NST Pre- Ecampaia P3 >160(110 x2,minutes) Start IV M(SCx, integration in the of oliginosis if any seeks of the operation in the of oliginosis if any seeks of the operation in the of oliginosis if any seeks of the operation in the of oliginosis if any seeks of the operation is and fluids if not tolerating PD, NST Fire With IV meds and fluids if not tolerating PD, NST Determine cause, check BP; Can try- Regian, Benadry, comparing in forced Fire With IV meds and fluids if not tolerating PD, NST Determine cause, check BP; Can try- Regian, Benadry, comparing in forced Fire With IV meds and fetal is any seeks of A Determine cause, check BP; Can try- Regian, Benadry, comparing in forced Fire With IV meds and fetal is any seeks of A Determine cause, check BP; Can try- Regian, Benadry, comparing in forced Fire With IV meds and fetal is any seeks of A Determine cause, check BP; Can try- Regian, Benadry, comparing in forced Define risk With IV meds and fetal is any seeks of A Determine cause, check BP; Can try- Regian, Benadry, comparing in forced Define risk With IV meds any seeks GA Concurrent Conditions for mIOL and suggested time of delway Define risk With IV meds any seeks GA Concurrent Conditions for mIOL and suggested tin the toligons if later GA	Pre-	BP ≥140/90, PCR ≥0.3,	Admit, i	induction at							
W/O S Pre- Edampsia w/ SF BP =160/110 x2,minutes apart, PG >0.3 (~ >1.1, pt <100k, LFTs >2 UN, pt <100k, LFT	eclampsia	24h urine PCR >300 time of diagnosis if									
Eclampsia w/ SF apart, PCR > 0.3, Cr > 1.1, pl < 100k, LFTs > 2 UL, headche unresolved with 13 development with and pulmonary edem, visual status Induce at time of diagnosis, can wait maternal and fetal status Induce at time of diagnosis, can wait maternal and fetal status PRI Visial status Induce at time of diagnosis, can wait maternal and fetal status Induce at time of diagnosis, can wait maternal and fetal status Induce at time of diagnosis, can wait maternal and fetal status Define risk Status Visial weeks CA Induce at time of diagnosis, can wait maternal and fetal status Induce at time of diagnosis, can wait maternal and fetal status INT Status	w/o SF		≥37 we	eks			Treat with IV meds and fluids if not tolerating PO, NST				
Eclampsia w/ paper, PRR >0.3, Cr >1.1, Induce at time of pl <100k, FTS >2 ULK, lagoress, can wait 13 4 weeks pending maternal and fetal velow, FTS >2 ULK, lagoress, can wait 13 4 weeks pending maternal and fetal velow, FTS >2 ULK, lagoress, can wait 13 4 weeks pending maternal and fetal velow, FTS >2 ULK, lagoress, can wait 13 4 weeks pending maternal and fetal velow, FTS >2 ULK, lagoress, can wait velow, FTS >2 ULK, lagoress, can wait status Category Description Normal baseline 110-160, T Moderate law velow, cacegory 1 or 11 trains Anything not category 1 or 11 trains Anything not category 1 or 11 trains Apsent variability and no variable velow, TTS -2 VE Controlled w/or meds: 38*-39* Concurrent conditions: 34*-37* Controlled w/or meds: 38*-39* Concurrent conditions: 34*-37* Otronic HTN, controlled w/or meds: 38*-39* Controlled w/or meds: 38*-	Pre-	BP ≥160/110 x2,minutes	Start IV	MgSO ₄ ,	н	leadache	compazine, fioricet				
3.1 Pic 4.000, 01.02 ± 02 ± 000, 01.02 ± 000, 00.03 (cli in vince maternal and fetal status Pic 1.000, 01.02 ± 000, 00.	Eclampsia w/	apart, PCR >0.3, Cr >1.1,	Induce	at time of							
Placenta previa, Tylenol, SOB 2/2 uninonary edems, visual disturbance, RUQ pain intermal and fetal disturbance, RUQ pain intermal baseline 110-160, inderrate variability and no variable decelerations (accels 4/-) Anything not category in 11 Anything not categ	SF	plt <100k, LFTs >2 ULN,	diagnos	is, can wait							
Tylesol, SOB 2/2 pulmonary edema, visual status Image: contraction		headache unresolved with	til 34 we	eeks pending	<9	Iron infusion					
Public diverse, RUQ pain Statutos 30°-37° Weeks GA Polyhydramnios (mid) 30°-37° Weeks GA Define risk Viriability Category Description Normal baseline r10-160, moderate variability and no variable or late decelerations (access 4-/) Nariability Normal baseline r10-160, moderate variability and no variable or late decelerations (access 4-/) Maceslaration Category Description Normal baseline r10-160, moderate variability in the presence of pederation Controlled w/o meds: 38°-39° Controlled w/o meds: 38°-39° Controlled w/o meds: 38°-39° Define risk (bring to the presence of pederation (bring to the presence of the deceler, so the doceler, so the docel		Tylenol, SOB 2/2	materna	al and fetal	<7			• •	36º-37º weeks GA		
Celespines of FH1 Define risk Contraction Define risk Contraction Define risk Contraction Define risk Contraction Celespines of FH1 Normal baseline 110-160, In moderate variability and no variable or late decelerations (accels +/-) In Anything not category I or III tracing Controlled w/ meds: 38*-39* Controlled w/ meds: 38*-3		pulmonary edema, visual	status			Transfusion	Oligoh	ydramnios	36º-376 weeks	s GA	
Chapters of H1 Category Description Contraction Define risk Operation in the presence of the presence of recurrent variable decel, recurrent variable deceel, recurrent variable decel, recurrent variab		disturbance, RUQ pain					Polyhydrar	mnios (mild)	39º-40 ⁶ weeks	s GA	
Define risk Contraction Upuble Decleration Category Decleration Decleration 3"-10"%dll:: 38*39° Baseline rate Contraction Category Decleration To moderate variability and no variable on late decelerations (accels +/): Acceleration On current conditions: 34*37* Acceleration Decleration Decleration Decleration To moderate variability in the presence of recurrent variable decelerations (accels +/): net deceles, or bradycardia, or sinusoidal pattern GHTN, controlled 37*, or at diagnosis if later GA Decleration Decleration Decleration To bradycardia, or sinusoidal pattern Pre-edampsia w/o SF 37°, or at diagnosis if later GA Pre-edampsia w/o SF 34° or at diagnosis if later GA Controlled w/o meds: 39*39* weeks GA Decleration Decleration Decleration Controlled w/o meds: 39*39* weeks GA Image: Provide the rest by BSUS Previdable Provide rest by BSUS Stage Description A Prace orders Stage Description No cervice the description of index in the engineered index in the engineered in the order of the provide placened cord in the order of the provide placened index in the engineered in the order of the provide placened index in the engineered in the order of the provide placened cord in the order of the provide placened index in the engineered in the order of the placened index in the engineered in the ordes in the engineered index in the engine prem	Fet	al Heart Tracings		Catego	ries of F	ΉT		IUGR			
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The second se	President A Carta						Pre-eclar	Pre-eclampsia w/o SF 37°, or at diagnosis if later GA			
Terminology Vecks Admitting a patient GDM Controlled w/o meds: 39°-39° weeks GA 1. Print prenatal records if available Stages of Labor 2. Let attending/midwire know Stages of Labor 3. Confirm vertex by BSUS Previable <23 6/7 weeks		212	e Decel		80	ecel	Pro-ocla	mocia w/ SE	34 ⁰ or at diag	nosis if later GA	
Image: contrast of the second seco	Fetal heart rations					also bloks about		· ·		Controlled w/o meds: 39 ⁰ -40 ⁶ weeks GA	
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Admitting a patient Stages of Labor 1. Print prenatal records if available 1. Print prenatal records if available<											
Admitting a patient Stages of Labor 1. Print prenatal records if available 1. Print prenatal records if available<									34º-36 ⁶		
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APGARS Within 30min after infant, signs 30 minutes, will need to go back to OR for a D and E Meds Notes 0 points 1 point 2 points Stage within 30min after infant, signs 30 minutes, will need to go back to OR for a D and E Meds Notes Activity Absent Flex Arm & Legs Active Pulse 0 <100	Admitting a patient					147 1		Sta	ages of Labo	r	
APGARS Stage Stage Vitrous Notes 0 points 1 point 2 points Nitrous Be sure to consent prior to use Activity Absent Flex Arm & Legs Active Stage Within 30min after infant, signs of blood, fundal rebound 30 minutes, will need to go back to OR for a D and E IV stadol or nubain Do not use if >7cm dilated Appearance Blue / pale all over Pink body Blue extremities Pink Pink body Blue extremities Pink Appearance Blue / pale all over Pink body Blue extremities Pink Pink Other all over Other all over			ulatir afte				Stage	Dese	cription	Arrest	
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