

cric

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Continuing Education from Nebraska Methodist College

1

You must attend the entire program - no partial credit can be awarded

2

You must complete an evaluation (it will be emailed to you) within 7 business days after the program date or you will receive an incomplete

3

A link to access your certificate will be automatically generated and emailed to you within 24 hours of completing all requirements

4

If you have any questions or need assistance, please contact us at 402-354-7100 or pd@methodistcollege.edu

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Program Disclosures

- <u>Provider Approval Statements</u>: Nebraska Methodist College Professional Development is approved with distinction as a provider of nursing continuing professional development by the Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.
- <u>Successful Completion Requirements</u>. In order to obtain contact hours or continuing education credit for this educational activity, participants are required to complete stated requirements:
 - Attendance at the entire activity
 - Completion/submission of evaluation form within 7 days of the program
- <u>Relevant Financial Relationships with an Ineligible Company</u>. No relevant financial relationships were identified for planners or presenters.

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Subscribe to NMC CE emails!





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Topics to be covered...

- OB Hypertension and postpartum hemorrhage
- Shoulder dystocia and interventions
- Medications used in OB
- Neonatal resuscitation
- Restraints
- Fetal pillow
- IUPC
- Fetal Scalp Electrode use and application
- Kiwi Vacuum
- Appropriate blood pressure cuff sizing

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Restraints

- Time limited MD order required. No PRN orders allowed.
- Documentation required every 2 hours
- Vital signs a minimum of every 2 hours
- Proper application: Video





OB Supplies

- Fetal Pillow
 - Fetal Pillow Balloon Cephalic Elevation Device For Cesarean Sections -CooperSurgical
- **IUPC**
 - Video
- Blood Pressure Cuff Sizing
 - Using incorrect cuff results in falsely elevated readings
 - The end of the cuff with the white line should line up between the two white lines towards the middle of the cuff.

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OB Supplies

- Kiwi Vacuum & Policy Review
 - Operated by MD
 - RN should use marker button to mark on fetalink when the vacuum is applied, when the pressure gets to green (MD will say this), when the pressure is released back to yellow (MD will say this) and any pop offs.
 - Document in "Method of Delivery": "Vacuum assist" 0
 - Document in "Newborn Risk Factors": "Vacuum assist"
 - Newborn Documentation:

POLICY:

1. Following instrumental delivery which includes vacuum or forceps, the nurse must identify risk factors which would facilitate the need for increased surveillance in the newborn.

2. Risk factors for increased surveillance include:

a. Maternal Factors

i. Vacuum or Forceps Application ≥15 minutes

ii. 20 po-915

iii. Use of both vacuum and forceps

b. Nonatal Factors (after use of vacuum or forceps)

i. Apgar <7 at 5 minutes

iii. Shoulder dystocia

iii. Obvicus scalp injury

iv. Cord blood PH <7.0





- August 11th we will officially convert to Teams for the message line (aka the book for call), deviation sheet and huddle sheet
- Third floor is moving all of this to Teams for their unit, we do not have access
- Everyone needs to have access to teams-do you have this on your phone? That will make it easier to put your name in the book.
- Huddle Sheet will be used at shift change to ensure and document safe staffing.
 Please utilize the acuity tool and staff accordingly.
- Deviation Sheet is a way to communicate changes in staffing to Sharon/Tonia. Use this when someone calls in sick or goes home on call or comes in extra etc
- There is a form to use to "put your name in the book" for call. Andrea will try to
 update this form so that it is locked prior to the date that this opportunity opens for
 each schedule. The data from the form flows into an excel sheet which is available op
 Teams and everyone can see who is in the book and when they requested call.

Please be patient as we all learn this new process. Feedback is welcome

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Housekeeping Items

- Remember to scan your pumps and document your rate changes in I/Aware
- See email from Tonia about collecting cord blood gas
 - Blood in syringe, air bubbles gone, remove needle, apply cap, label syringe, bag syringe, place bagged syringe in **separate** bag of ice.
- Utilize the checklists available to you!

