Pain and Coping Assessment and Interventions During Labor

	Year:		
Evaluator Signature:	· · · · · · · · · · · · · · · · · · ·	· ,	
Employee Signature:		Date:	

Expected Competency	Demonstrates Competency Date/Initial	Notes/Comments
Assesses woman's pain level using a pain assessment tool such as a numeric scale,		
according to facility protocol.		
Identifies woman's plan for pain control and supports woman's decision.		
Demonstrates non-pharmacologic pain		
interventions such as:		
massage or back rub		
application of heat and cold		
 position changes when appropriate such as: 		
o ambulation		
o sitting, rocking		
o side-lying		
 breathing techniques 		
acupressure		
• distraction		
 hydrotherapy, if available 		
sterile saline injections		
Describes paraenteral medications available		
for use during labor and includes:		
 appropriate time of administration 		
• dosages		
 maternal effects 		
 fetal and neonatal effects. 		
Verbalizes facility protocol about nursing		
responsibilities before, during and after		
regional analgesia/anesthesia placement.		
Administers bolus IV fluid before initiation of		
regional anesthetic/analgesic, if ordered.		
Verbalizes maternal and fetal assessments and		
frequency before, during, and after regional		
placement, according to facility protocol:		
maternal vital signs and intake and		
output		
 fetal heart rate and pattern and uterine 		

activity by fetal monitor, using NICHD terminology to interpret data maternal bladder for urine retention coping or pain level. Verbalizes potential side effects and complications related to regional analgesia or anasthesia in labor including; maternal hypotension intravascular injection of local anesthetic maternal respiratory distress fetal bradycardia maternal fever maternal fever maternal urinary retention decreased motor strength and control pruritus nausea and vomiting slowing of labor progress potential decrease in effective pushing during the second stage of labor. Identifies interventions for side effects or complications such as lateral positioning additional IV fluid bolus as ordered phedrine IV cardiopulmonary resuscitation if necessary notification of anesthesia or obstetric care provider as needed assists woman whenever she ambulates, when ambulation is possible antiemetic medication administration delaying pushing during the second stage of labor to allow sensation of pressure to increase sufficiently to guide the women's pushing efforts. Documents according to facility protocol.		
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