

PROTOCOL FOR: Coping: Care of the Hospitalized Pregnant Patient

DESIRED PATIENT

OUTCOMES: Patients and their families in crisis will be supported appropriately. Patients will demonstrate positive coping through discussion of emotional reactions as well as utilization of measures aimed at a positive hospital experience.

CLINICAL
ASSESSMENT
AND CARE:

1. Assess patient knowledge base regarding reason for hospitalization, physiology of pregnancy and plan of care while hospitalized and after discharge.
2. Discuss with patient her perceptions of hospitalization and assess perceived impact of hospitalization on the patient and her family.
3. Explore with the family past and present coping mechanisms used in time of stress to see if behaviors that were beneficial in the past will be appropriate for this life crisis.
4. Identify patient support systems and who normally is the strongest in a crisis situation.
5. Explore with the patient her feelings about the pregnancy. (i.e., was it planned, involvement of father of baby and family).
6. Assess family reaction/adjustment to patient hospitalization.
7. Identify those factors that might increase stress during the hospitalization (i.e., loss of income, childcare, inadequate insurance, restructuring of roles).
8. Assess non-verbal cues and negative behaviors.
9. Provide a plan of care that allows as much patient control and participation as possible within the parameters of medical plan.
10. Encourage family to visit - allow significant other and children to spend private time with patient.
11. Give patient specific guidelines for non-negotiable care, i.e., fetal testing, activity.
12. Provide interdisciplinary assistance to patient/family and/or staff when necessary (i.e., social work, psych, occupational therapy, financial planner).
13. Allow patient to express feelings openly and be non-judgmental of coping mechanisms.

PATIENT
TEACHING:

1. Instruct patient in physiology of pregnancy and the consequences as related to their antenatal diagnosis.

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2. Encourage patient to share any concerns, questions or fears she or her family is experiencing.
3. Provide anticipatory guidance for delivery and/or discharge.
4. Provide educational materials (i.e., pamphlets, films, books) to patient and family to assist in preparation for delivery, newborn and preemie care, and to assist inpatient's understanding of her hospitalization.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 2/90

REVISION DATES: 5/93, 3/97, 2/00, 7/03

REVIEWED DATES: 1/09