## Case Study

### Pregnancy Complication

**PRETERM LABOR**

<table>
<thead>
<tr>
<th>Patient</th>
<th>A. Young 29 year old</th>
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| Current Pregnancy| G1 P0 29 weeks and 3 days  
Contractions q 3 minutes  
Duration 20-30 seconds  
FHT 135 for the first 30 minutes after admission  
Pain rate: 6 |
| Past Medical Hx  | None                |
| Vital signs      | T: 37.6  
P: 86  
R: 20  
BP: 106/66 |

**a) What are your questions for this patient?**
- When did your contraction begin?
- How long have your contraction been painful
- Have you had a sudden gush of fld.?
- Why?
- It is important to establish timing of contraction.
- Based on research 30% of preterm labor resolves spontaneously and 50% deliver at term who are hospitalized.

**b) What are your priorities for care?**
- FHR and contraction assessment
- Contact the provider
  - Why?

**c) What is your plan for next steps in care?**
- Start IV for possible fluid bolus
- Antibiotic Therapy
  - Why?

**d) What orders can you anticipate?**
- Antibiotic Therapy
  - Tocolysis
<table>
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<tr>
<th>o Administration of Magnesium Sulfate</th>
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<tbody>
<tr>
<td>Why?</td>
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<tr>
<td>e) <strong>What findings or changes would make your worry?</strong></td>
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<tr>
<td>- Cervical change</td>
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<td>o Why?</td>
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<td>f) <strong>What findings would make you call the provider immediately?</strong></td>
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<td>- Cervical change</td>
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<td>Why?</td>
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