

Diabetes Case Studies
Intrapartum
Lower Risk

Patient	Marisa, a 25-year-old G2 P1 with Gestational Diabetes Mellitus treated with oral medications.
Current Pregnancy	37 weeks 2 days
Chief complaint	She has been admitted in active labor.
EFM	Variability: Moderate Variability 6-25 bpm Baseline: normal, 150 bpm Accelerations: present Decelerations: Absent and occasional, small Variable Tocodynamometer: contractions every 3 minutes, 60 sec duration, strong on palpation
Cervical exam	4cm, 90%, -1 station
CBG	Her blood sugar on admission is 120 mg/dL.
Vital signs	Time: 1700 <ul style="list-style-type: none"> • T 37.2 • HR 106 • RR 18 • BP 140/80
Nursing assessments	<ul style="list-style-type: none"> • CBG every 2 hours if blood sugars remain between 70-120 mg/dL
4 hours after admission	<ul style="list-style-type: none"> • Marisa is now 8 cm, +1 station, 100% effaced. • Her blood sugar is 110. • FHR and contraction pattern are the same • Vital signs are stable
Goal = Maintain blood sugar between 70-120 mg/dL throughout labor and delivery, in order to prevent neonatal hypoglycemia while acknowledging the caloric requirements of labor.	
Newborn Care after Delivery	<ul style="list-style-type: none"> • What can you anticipate doing for the newborn after delivery? <ul style="list-style-type: none"> ◦ Initiate hypoglycemia protocol for frequent testing because of Mom's high blood sugar and use of insulin during pregnancy.