ECLAMPSIA CHECKLIST

| TRAINEE:_ | RATER: _ | | | |
|-----------|----------|--|--|--|
| | | | | |

| STEPS | | YES (1) | NO (0) | COMMENT | ΓS: | | |
|--|----------------------|------------|-----------|---------|-------|-------------------|--|
| Call for Assistance | | | | | | | |
| Designate: | | | | | | | |
| o team leader, | | | | | | | |
| checklist reader, and | | | | | | | |
| o primary RN | | | | | | | |
| Ensure side rails up | | | | | | | |
| Protect airway and improve oxygenation by: | | | | | | | |
| Placing maternal pulse oximetry, | | | | | | | |
| Supplemental oxygen (100% | | | | | | | |
| nonrebreather)' | | | | | | | |
| Lateral decubitis position, | | | | | | | |
| Bag-mask ventilation available, | | | | | | | |
| Suction available | | | | | | | |
| Continuous fetal monitoring | | | | | | | |
| Place IV and draw preeclampsia labs | | | | | | | |
| Ensure medications appropriate give | | | | | | | |
| history | | | | | | | |
| Administer magnesium sulfate | | | | | | | |
| Administer antihypertensive therapy if | | | | | | | |
| appropriate | | | | | | | |
| Develop delivery plan, if appropriate | | | | | | | |
| Debrief patient, family, and obstetric | | | | | | | |
| Global Rating | | | | | | | |
| I would trust this learner to care for a | 1 | 2 | 2 | 3 | 4 | 5 | |
| patient presenting with eclampsia | Strongly Disagree | Disa | gree | Neutral | Agree | Strongly Agree | |