



DAYAG, Kyla Reine A. N13 – Maternal Care Nursing

# CASE STUDY #1- CARE OF THE INFANT HEALTH CARE PLAN

## NAME OF CLIENT: M

ASSESSMENT CUES	NURSING DIAGNOSIS	GOALS & OUTCOMES (NOC)	INTERVENTIONS (NIC & RATIONALE)	EVALUATION
SUBJECTIVE	Readiness for Enhanced	NOC:	NIC:	
CUES:	Childrearing Process (0028)	Knowledge: Breastfeeding (1800)	Parent Education: Infant (5568)	
		Knowledge: Infant Care (1819)	Referral (8100)	
The client's	Background Knowledge:	Parenting Performance:		
children are a 4-	There were various	Infant/Toddler Physical Safety		
month-old infant	problems and areas of	(2900)		
and a 1.5-year-old	concern identified in the			
toddler.	case of client M these	GOAL:		
	include concerns regarding	After the health education, the		
The client is	the infant's nutrition,	client exhibits an understanding		
currently	development, and future	of normal infant development and		
breastfeeding.	care. All of these are rooted	plans for the future care of		
	in the client's need for	children.		
The client feels	enhanced knowledge on			
that her infant is	the said aspects of	OBJECTIVES:	The nurse will:	
not growing well	childcare. In the aspect of	After 45 minutes of nursing		
enough.	nutrition, the client worries	intervention, the client will be		
	about her child's growth	able to:		





The client	and compared it to the			
reported that she	growth of the neighbor's	1. Recognize that her infant's	• Discuss that the infant's	The client verbalizes
will leave her	child. Additionally, the	anthropometric measures	anthropometric measures	understanding of normal
children under the	client wants to know which	and developmental	are within the normal values	anthropometric
care of her 18-	formula of milk is necessary	changes are normal and	using the Growth Chart	measures,
year-old sibling to	for Joshua and if	appropriate for his age.	• Demonstrate infant reflexes	developmental
start a new job.	multivitamins are necessary.		to the mother and explain	milestones of infants in at
	Moreover, based on the		the importance	least 1 sentence.
OBJECTIVE CUES:	photo of the infant, a		( <i>Rationale:</i> These interventions	
	noticeable risk is observed		address the concern of the	
The client's infant	which comes in the form of		client regarding her infant's	
has normal weight	jewelry. Accessories may		development. By using the	
gain.	cause aspiration and		Growth Chart, the nurse will be	
	suffocation threatening the		able to explain the normal and	
The infant's	infant's safety.		abnormal values of weight,	
weight, length,			height, and HC. By	
and head	Aside from all of these,		demonstrating the reflexes, the	
circumference are	future potential problems		nurse can show the infant's	
within normal	can be identified. This		strengths which further	
range.	includes possible sibling		consolidates the client's belief	
	rivalry as the spacing		that her infant is growing well.)	
The infant has a	between the two siblings is			
social smile, has	quite close and the mother			
good head	may devote all her attention			
control, and can	to her infant. Another	2. Explain the nutritional		The client answers at
rollover.	identified problem would	needs and requirements	-	-
	be the risks of leaving the	of her infant.	her infant	about her infant's
	children under the			nutrition correctly.





The infant is active supervision of an	Give information on
with a good suck. adolescent who has no	breastfeeding The client correctly
experience of childrearing.	Demonstrate how to read interprets the nutritional
	nutritional labels label given.
Overall, although there is a	( <i>Rationale</i> : The aspect of
risk for an ineffective	nutrition is one of the client's
childbearing process, the	primary concerns. By doing all
priority in the present is	of these interventions the nurse
equipping the client with	equips the client with
knowledge and information	knowledge about
about addressing her	breastfeeding and infant
concerns about her infant's	nutrition in general. The nurse
well-being. To maximize	would also be able to address
the health teaching, it is	the necessity of multivitamins
necessary to also include	for the infant. All of these will
the identified possible	the mother to practice EBF for
issues in the future and offer	at least 6 months. Lastly,
solutions to the client.	teaching the client on reading
	nutritional labels will help her
	choose appropriate food
	products, especially formula
	milk for her infant.)
	3. Recognize the safety risks • Evaluate the need for The client verbalizes
	of putting jewelry on the accessories understanding of child
	baby safety regarding





	• Give brief information on	aspiration and
	how accessories may cause	suffocation in at least 1
	aspiration and suffocation	sentence.
	• Encourage the client to	
	maintain supervision if the	
	infant is wearing jewelry	
	( <i>Rationale:</i> These interventions	
	guide the client to be vigilant	
	for risks that threaten her	
	infant's safety. Evaluating the	
	necessity of jewelry will enable	
	the nurse to know the religious,	
	superstitious, and other	
	purposes, this opens an	
	opportunity to address any	
	misconceptions about	
	childcare.)	
4. Reflect on her care for her		The client verbalizes
toddler	the toddler for the past	
	months	the toddler in at least 1
	• Encourage the client to	sentence.
	devote attention and spend	
	time with the toddler	





	( <i>Rationale</i> : Sibling rivalry is common among toddlers. Preventing this early will hinder any safety risks to the infant.)	
5. Plans for the future care of the child	<ul> <li>Refer the client to any nearby children's centers</li> <li>Encourage the client to delay job entry until children are older or leave them under the supervision of experienced relatives</li> <li>Assess the capacity of the 18-year-old sibling regarding childcare</li> </ul>	future care of her child by
	( <i>Rationale</i> : These interventions recognize the potential safety risks of leaving the children under the supervision of an adolescent. Referring the client to child centers such as preschool and nursery centers would be ideal. The other interventions can also help the client to consider her decision. If all else fails, the nurse will	





also assess the childcare	
capacity of the 18-year-old and	
advise the client to educate	
and involve her in childcare in	
advance.)	

# HEALTH EDUCATION PLAN

Title of Activity: Proper Care of the Infant

Target Participants/Audience: Client Maria and her 18-year-old sibling

Goal: After the health education, the client exhibits an understanding of normal infant development and plans for the future care of children.

After 45 minutes of nursing intervention, the client will be able to:1a. Define the normal anthropometric measures for infants at 4 months ageLecture/Discussion on the normal values of anthropometric measures and developmental changes are normal and appropriate for his age.1a. Define the normal normal anthropometric measures for infants at 4 months ageLecture/Discussion on the normal values of anthropometric measurement for infants at 4 months ageImage: Description010 minThe client verbalizes understanding of normal anthropometric measures, developmental changes are normal10 minThe client verbalizes understanding of normal and abnormal values	Learning Objectives	Content	Instructional Activity/ Method	Resources Needed	Time Allotment	Evaluation Method/Criteria
	nursing intervention, the client will be able to: 1. Recognize that her infant's anthropometric measures and developmental changes are normal and appropriate for	anthropometric measures for	normal values of anthropometric measurement for infants at 4 months age • Utilize growth chart to emphasize the normal	Growth Chart	10 min	understanding of normal anthropometric measures, developmental milestones of infants





<ul> <li>1b. Define the developmental milestones at 4 months of age</li> <li>What developmental changes to expect as the infant grows?</li> </ul>	month-old infants and	The chart that shows expected developmental milestones for infants as they grow	
<ul> <li>1c. Define infant obesity</li> <li>What weight can be considered obese?</li> <li>How to prevent infant obesity?</li> <li>Formula feeding can increase the risk of infant obesity</li> <li>Infant obesity can persist in childhood and adulthood</li> </ul>	Lecture/Discussion on infant obesity, causes, and preventive measures	A growth chart to describe large for age babies Verbal instruction on the details regarding causes and preventive measures	





2				Durale as	
2.		2a. List the benefits of		Brochure on	10 min The client answers at
	nutritional needs	exclusive breastfeeding for 6	<ul> <li>Benefits of EBF</li> </ul>	breastfeeding and	least 4 out of 5
	and requirements	months	<ul> <li>Proper nutrition for</li> </ul>	proper nutrition of	questions about her
	of her infant.	2b. Discuss proper nutrition	infants-age 4 to 12	infants	infant's nutrition
		for infants from 4 to 12	months		correctly.
		months	• Difference of breastfed		
		<ul> <li>Answer the client's</li> </ul>	and formula-fed babies		
		concern regarding	• Foods infants can and		
		multivitamins	cannot eat		
		2c. Compare breastfed	Contents of a good	Comparative	
		children from formula-fed	formula milk	graphics on	
		children		breastfeeding and	
		2d. Discuss the foods infants		formula feeding	
		can and cannot eat		ionnula leeding	
					<b>T</b> I I
		2e. Discuss what good		Photos that show	The client correctly
		formula milk is made of	nutritional labels in food	nutritional labels	interprets the
		<ul> <li>Reading nutritional</li> </ul>	packages		nutritional label
		labels in milk			given.
		packages			
1					





3.	Recognize the safety risks of putting jewelry on the baby	<ul> <li>3a. Evaluate the need for jewelry (religious, superstitious, etc.)</li> <li>3b. Explain how bracelets and necklaces can cause aspiration and suffocation</li> <li>3b. Emphasize the need for parental supervision when the infant is wearing accessories</li> </ul>	Ask the client why the infant needs to wear jewelry and address misconceptions if any Lecture/Discussion on infant safety regarding aspiration and suffocation	Infographics on child safety	5 min	The client verbalizes understanding of child safety regarding aspiration and suffocation in at least 1 sentence.
4.	Reflect on her care for her toddler	<ul> <li>4a. Discuss how to avoid sibling rivalry</li> <li>Encourage the mother to devote time for her daughter</li> <li>Tell the mother to talk to her daughter while feeding the baby, the mother can give her daughter a baby doll</li> </ul>	Lecture/Discussion on sibling rivalry and risks on infant's safety Show the client how to involve the toddler while feeding the infant	Verbal instruction on sibling rivalry and safety risks Photos showing toddler involvement when feeding the infant	10 min	The client verbalizes reflection on her care for the toddler in at least 1 sentence.
5.	Plans for the future care of the child	5a. Evaluate the child-caring capacity of the 18-year-old sibling with the client	Ask the client and the 18-year- old questions about childrearing	Q & A List of prepared questions to assess capacity on childrearing	10 min	The client plans for the future care of her child by listing at least 2 ways on how her children will be cared for in the future.





5b. Encourage the mother to	Give the client information on	List of contact	
utilize nursery and preschools	nurseries and preschools	numbers and	The client and her
if accessible	around their area if any	addresses of nursery	sister answer at least
		and preschools	8 out of 10 questions
			about childrearing
5c. Explain the necessary	Lecture/Discussion on the	PowerPoint	correctly.
aspects of child-rearing to	necessary aspects of child-	presentation about	
both the client and the 18-	rearing	the aspects of child-	
year-old sibling		rearing	
<ul> <li>Nutrition</li> </ul>			
• Sleep			
<ul> <li>Activity</li> </ul>			
<ul> <li>Dressing &amp; Hygiene</li> </ul>			
<ul> <li>Infant and Toddler</li> </ul>			
Safety			
5d. Address other concerns of		Q & A	
the client regarding the infant			

## References:

Aldaba, J. (2022). Care of the Infant. Lecture Slides

Pillitteri, A. (6th ed.).(2010). Maternal & Child Health Nursing Care of the Childbearing & Childrearing Family. Lippincott Williams & Wilkins. Philadelphia. (Chapters 29 to 33)