

Nursing Postpartum Assessment

Patient information											
Name:											
Date:						Time of assessment:					
Gravida/para:						Delivery type:		Vaginal		C-section	
Complications during delivery:						Yes		No			
If yes, describe:											
Vital signs											
Temperature:						Pulse:					
Respiratory rate:						Blood pressure:					
Pain score (1–10):		1	2	3	4	5	6	7	8	9	10

BUBBLE-LE assessment

Breasts						
Condition:	Soft	Filling	Firm	Engorged	Tender	
Nipple condition:	Intact	Cracked	Inverted	Sore	Bleeding	
Breastfeeding status:	Yes	No				
Lactation concerns:						
Interventions:						
Uterus						
Fundal height:						
Consistency:	Firm	Boggy				
Position:	Midline	Deviated to the right/left				
Interventions:						

Bladder										
Voiding:	Adequate	Inadequate	Difficulty voiding							
Urine output:	Normal	Retained								
Symptoms of UTI:	Yes	No								
Interventions:										
Bowels										
Bowel movement:	Yes	No	Constipated							
Flatulence:	Yes	No								
Hemorrhoid:	Yes	No								
Interventions:										
Lochia										
Amount:	Scant	Moderate	Heavy							
Color:	Rubra	Serosa	Alba							
Clots present:	Yes	No								
Odor:	Yes	No								
Interventions:										
Episiotomy/perineum (or incision site)										
Condition:										
<input type="checkbox"/> Intact	Redness		Edema							
<input type="checkbox"/> Ecchymosis	Discharge		Approximation of edges							
Pain score (1–10):	1	2	3	4	5	6	7	8	9	10
Interventions:										

Legs (Homan's sign/DVT check)				
Edema:	None	Slight	Moderate	Severe
Pain on dorsiflexion (Homan's sign):		Yes	No	
Varicosities:	Yes	No		
Interventions:				
Emotional status				
Mood:	Calm	Anxious	Depressed	Irritable
Bonding with baby:	Positive	Negative	Neutral	
Support system:	Strong	Limited		
Postpartum depression signs:		Yes	No	
Interventions:				

Additional notes

Name of assessor: _____

License number: _____ Signature: _____