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**Step 1 Description:**

One of the patients that was on my side was on seizure precaution. The patient was sleep deprived for almost 24 hours when in the morning after report, started to experience a seizure once drifting off to sleep. We were at the nurse's station when the nurses were notified by the lady that monitors the activity of the seizure precaution patients, and everyone stopped what they were doing and rushed in there. I ran in there along with two other nurses and I started to help by plugging and putting the nasal cannula on the patient. Two of my other classmates joined as well trying to find a vital sign machine. There was a total of 5 people helping along with the patient's mother at the bedside. We were able to lay the patient on his side while he experienced the seizure and made sure he wasn't choking. He was able to "come back to us" as the nurses were saying after about a minute, but he was confused for an extra 10 minutes I was in there helping the patient get situated. My nurse and I left when we knew the patient were stable and the nurse didn't need any more help.

**Step 2 Feelings:**

I was in shock and disbelieve when the lady that was watching the seizure precaution patients came out and reported that a patient was having a seizure because it was going to be my first time seeing one firsthand. My mind was just in blank, but my body said go and rushed to the room. Once I saw the patient in mid epileptic episode my lecture notes started to scrip in my brain. I started to feel like I need to help but I didn't know how and also felt like I was in the nurse's way. One of the nurses just gave me a duty to help and my reaction was to do what she told me with no hesitation. I felt scared but also productive in the care of the patient. Once I

knew my little input did something for the patient, I felt good about myself and the nurses were just telling me thank you and good job on acting fast. I learned something new about myself and realized I can work under pressure and not get brain blocked. I knew more than I gave myself credit for. It is an important feeling because it made me feel confident about myself.

### **Step 3 Evaluation:**

The good thing about the event is that the doctor got his EEG that he was looking for in order to further the patients care and also, I was able to see what we learned in class first-hand. The bad and difficult part would be just watching the mom cry and knowing we can't do much but let the patient have his episode and make sure he doesn't get hurt or choke. Also, when the patient was returning to his senses, the mom asked him if he knew who she was, and he said no. That was difficult to see. The easy part was the will to help. The thing that went well was the patient was safe while experiencing his epileptic episode. What I did well was doing my duty in connecting the nasal cannula to the wall and put on the patient. I did that fairly quick. Everyone had a role and pulled through with no complications, if it was turning the patient, plugging a suction, vitals or the nasal cannula, everyone did a good job. I didn't know what to expect. I have nothing to compare my experience with. Thankfully nothing went wrong and the patient got the care he needed at the moment.

### **Step 4 Analysis:**

What I can apply to the situation would be to have the room prepped when a patient is in seizure precaution. By that, I mean have the nasal cannula plugged in to the wall ready to go. Have the suction canister ready to go as well and carry a manual pulse ox for quick action. The evidence would be seeing tonic/clonic phase. I saw the transition and made my lecture a little

clearer and I was able to apply it to the situation. The bodies of knowledge that are relevant to the situation would be in our lectures we were taught generalized seizures were characterized by loss of consciousness and falling. Body stiffens (tonic) lasting 10-20 seconds, with subsequent jerking of extremities (clonic) lasting 30-40 seconds, cyanosis, excessive salivation, tongue or cheek biting, and incontinence may occur. He was experiencing almost all but incontinence. I don't believe there was a broader issue arise except that he was confused for a long time, but I believe it was a good thing because now doctors can go and further and better treat the patient. My perspective was a learning experience and I sure it was for my other two classmates. I am not sure how I would compare my experience with others, I wasn't paying much attention to other reactions, I was more focused on making sure everything that needed to be done was done. I was ready. On a good note, my classmates and I were able to apply what we learned in our slides and see it firsthand.

#### **Step 5 Conclusion:**

A way I could have made the situation better or done differently is to be better prepared for future experiences. Be prepared in the sense of not just standing there until someone told me to do something but realize what needs to be done and jump on the task. It was my first experience, but I see it as a learning experience. The nurses at the scene encouraged me a lot and made me feel good about myself and I am thankful for their kindness. I learned that it is difficult to watch a patient go through an episode. What I learned from the event was that we can learn about it all we want and read about it, but it is a whole different experience and environment seeing it in real life. On a real patient. It was a learning experience for sure. It

saddens me to see the patient like that and the mom helpless. It seemed like she wanted to do something about it but she let the nurses handle the situation.

**Step 6 Action Plan:**

What I think about the overall situation is wow. I knew information about the generalized seizure and have studied it, but like I have said before it is a different feel when it is seen firsthand. The conclusion I can draw is that you have to be prepared for this. Mentally, physically, emotionally, and equipment wise. Something I would do differently would be like I said above, just know what duties need to be done and jump on it, don't wait for someone to tell me what to do. From the lessons I learned that I can use in the future would be stop whatever you are doing, run to the patients room, make sure you have everything you need from the start, know when it first started and provide patient safety at all times. I can use these tips in the future by applying to other situations. Having time management and be prepared at all times. This has taught me that I am capable of seeing and interacting with more medical issues than I had anticipated. I can deal with the stress and chaos without losing my train of thought. This will help me further improve by being more confident in myself and grabbing every opportunity that comes by way to grow in my education and my skills.