

Krishia Hernandez

Mental Health Case: Andrew Davis

Guided Reflection Questions

Opening Questions

How did the simulated experience of Andrew Davis' case make you feel?

- **The stimulated experience of Andrew Davis' case make me feel sad because of what he's been going through such as his daughters will not speak to him, he feel emberassed of what he did on the school board meeting especially he is a pastot at a large church, etc.**

Talk about what went well in the scenario.

- **What went well in the scenario are assess scene safety vefore you walk in, washing hands, and identifying patient. Also asking the questions and providing appropriate answers. Then patient agreeing to take prescribed medication.**

Reflecting on Andrew Davis' case, were there any actions you would do differently? If so, what were these actions and why?

- **Yes, in my first try, I did not correctly document the CIWA-Ar assessment tool because that is needed to provide the appropriate care, I did not ask for permission to ask question related to CIWA assessment - helps them to be involve in the care, and education - it is important to educate them about the results, substance, goals, etc. So they know what is happening and they can understand what is going on more with them.**

Scenario Analysis Questions*

PCC What issues have you identified that could be barriers to a successful treatment for Andrew Davis?

- **The issues that I identifies that could be barriers to a successful treatment for Andrew Davis is he continue to deny that he is an alcoholic by attending the 12 step meeting and leaving early because he was "not like those people" and he felt that he would not benefit from the meeting.**

How would you address the denial?

- **I would address the denial by asking the patient what caused him to end up in the rehabilitation facility.**

PCC/I Identify a support group that would be beneficial to Andrew Davis related to his position in the community.

- **Support groups that would be beneficial to Andrew Davis related to his position in the community are the Alcoholic Anonymous (AA) meeting, and Secular Organizations for Sobriety (SOS) – both are anonymous organization/meeting that will benefit him due to being a pastor.**

PCC/I Identify support groups that would be beneficial to Andrew Davis' family.

- **Support groups that would be beneficial to Andrew Davis' family are Al-Anon and Families Anonymous.**

S/PCC Andrew Davis is currently in Stage I of alcohol withdrawal. As he moves into Stage II (24 to 72 hours) and then into Stage III (after 72 hours), what behaviors should be assessed for and what safety measures should be initiated?

- **Stage 2 – Seizures and Hallucination – Put patient on seizure precaution, Use therapeutic communication to tell patient that we do not hear and see what they are hearing and seeing.**
- **Stage 3 – Delirium tremens – Orient patient to time, place, person**

Concluding Questions

How would you apply the skills and knowledge gained in the Andrew Davis case to an actual patient situation in different acute care units (emergency room, intensive care unit, obstetrics unit, etc.)?

- **I would apply the skills and knowledge gained in the Andrew Davis case to an actual patient situation in different acute care units by the importance of therapeutic communication and being non judgemental to be able to provide the appropriate care/intervention/support/resources that the patient will need.**

* *The Scenario Analysis Questions are correlated to the Quality and Safety Education for Nurses (QSEN) competencies: Patient-Centered Care (PCC), Teamwork and Collaboration (T&C), Evidence-Based Practice (EBP), Quality Improvement (QI), Safety (S), and Informatics (I). Find more information at: <http://qsen.org/>*