

## Colton Curtis

### Mental Health Case: Sharon Cole

#### Guided Reflection Questions

##### Opening Questions

How did the simulated experience of Sharon Cole's case make you feel?

The scenario made me feel in control but it also made me feel a little slow. I feel that in a real time situation I wouldn't have too much time to think about what to say next or to identify the problem of a patient. Time management would be a point of emphasis for me personally.

Talk about what went well in the scenario.

What went well in the scenario is that I did know what to do in most situations and what all the medications and interventions were in order to give the best care possible. Also, I felt my therapeutic communication was very good, I knew what to say to a patient in a manic phase which I feel is the most important part of establishing a good relationship, especially one of trust.

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

The only action I would do differently isn't the action itself but the order in which I performed the actions. I seemed to be all over the place rather than I specific order in which care would be a little more efficient.

##### Scenario Analysis Questions\*

**PCC** What issues have you identified that could be barriers to a successful treatment for Sharon Cole?

The biggest issue I saw was obviously that Sharon is in a manic state from her bipolar disorder. This created a inconsistent dialogue with Sharon and it caused for Sharon to not answer questions accurately and also just the subject randomly without any connection to a question or her condition.

How would you address the manic state?

The best to address the manic state I feel is to be the opposite, to be calm and slow and try to stimulate the least amount of the patients environment as possible. Also, it is important to be very nonjudgemental in your communication especially on what they say but also make sure to provide a stable environment in which the patient has obvious boundaries.

**PCC/I** Identify a support group that would be beneficial to Sharon Cole's husband.

Any support group that helps family members cope with a person who has bipolar disorder, especially a partner considering her condition got her to be agitated with her husband. Also, an education group that gives create detail in how to be helpful to their partner or family member that has bipolar disorder.

**PCC/S** What action should be initiated due to Sandra Cole's medication regimen?

There will need to be an action to ensure that Sharon takes her medication regularly. Also, great education considering the side effects of both lithium and risperidone. Both involve danerous side effects and also lifestyle changes that need to be considered and that Sharon needs to be educated on in order to keep Sharon on the medication regimen consistently.

### Concluding Questions

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

The communication aspect of Sharon's care was the most helpful for me. How can I be most appropriate with someone who has bipolar disorder or any patient while also getting the correct information in order to give the patient the best care possible. Also, how to manipulate the environment in order to help the patient who make be experiencing visual or tactile hallucinations something as simply as turning the lights down to ease a headache.

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\* *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/>*